

2010

# Comprehensive Preferred Drug List

(List of Covered Drugs)

WellCare of Florida

Please read: This document contains information about the drugs we cover in this plan.

Last updated (07/01/2010)



# WellCare Health Plan Florida Medicaid Preferred Drug List

Class	Product Name	Strengths	Form	Coverage Detail
<b>ANTI-HISTAMINE DRUGS</b>				
Derivatives, Miscellaneous	<i>cyproheptadine hcl</i>	4MG, 2MG/5ML	TABS, SYRP	
Ethanolamine Derivatives	<i>diphenhydramine hcl</i> <i>diphenhydramine hcl</i>	50MG 50MG, 25MG	CAPS TABS, CAPS	OTC-Covered w/Rx
Phenothiazine Derivatives	<i>promethazine hcl</i>	50MG, 25MG, 12.5MG, 6.25MG/5ML	TABS, SYRP, SUPP	
	<i>promethazine hcl plain</i>	6.25MG/5ML	SYRP	
	<i>promethazine vc</i>	5MG/5ML/ 6.25MG/5ML	SYRP	AL (max: 20y)
	<i>promethazine vc plain</i>	5MG/5ML/ 6.25MG/5ML	SYRP	AL (max: 20y)
	<i>promethegan</i>	50MG, 25MG, 12.5MG	SUPP	
Propylamine Derivatives	<i>actanol</i>	60MG/ 2.5MG	TABS	AL (max: 20y);OTC-Covered w/Rx
	<i>allerfrim</i>	30MG/5ML/ 1.25MG/5ML	SYRP	AL (max: 20y);OTC-Covered w/Rx
	<i>altafed</i>	30MG/5ML/ 1.25MG/5ML	SYRP	AL (max: 20y);OTC-Covered w/Rx
	<i>antihistamine /decongestant</i>	60MG/ 2.5MG	TABS	AL (max: 20y);OTC-Covered w/Rx
	<i>aprodine</i>	60MG/ 2.5MG	TABS	AL (max: 20y);OTC-Covered w/Rx
	<i>bpm pe</i>	4MG/5ML/ 7.5MG/5ML	LIQD	AL (max: 20y)
	<i>chlorpheniramine maleate</i>	4MG	TABS	AL (max: 20y);OTC-Covered w/Rx
	<i>chlorpheniramine/pseudoephedrine cr</i>	8MG/ 120MG	CPCR	AL (max: 20y)
	<i>dehistine</i>	2MG/5ML/ 1.25MG/5ML/ 10MG/5ML	SYRP	AL (max: 20y)
	<i>genac</i>	60MG/ 2.5MG	TABS	AL (max: 20y);OTC-Covered w/Rx
	<i>lohist-12d</i>	6MG/ 45MG	TB12	AL (max: 20y)
	<i>phenabid</i>	8MG/ 20MG	TBCR	AL (max: 20y)
	<i>pse bpm</i>	4MG/5ML/ 60MG/5ML	LIQD	AL (max: 20y)
	<i>respahist</i>	6MG/ 60MG	CPCR	AL (max: 20y)
	<i>silafed</i>	30MG/5ML/ 1.25MG/5ML	SYRP	AL (max: 20y);OTC-Covered w/Rx
	<i>sildec-pe</i>	4MG/5ML/ 12.5MG/5ML	SYRP	AL (max: 20y)
	<i>sudahist</i>	12MG/ 120MG	TB12	AL (max: 20y)
	<i>tri-afed allergy/head cold</i>	60MG/ 2.5MG	TABS	AL (max: 20y);OTC-Covered w/Rx
	<i>tri-pseudaphed</i>	60MG/ 2.5MG	TABS	AL (max: 20y);OTC-Covered w/Rx
	<i>uni-hist</i>	1MG/ML/ 12.5MG/ML	LIQD	AL (max: 20y)
Second Generation Antihistamines	<i>alavert allergy/sinus</i>	5MG/ 120MG	TB12	OTC-Covered w/Rx
	<i>allergy</i>	10MG	TABS	OTC-Covered w/Rx
	<i>allergy relief</i>	10MG, 5MG/5ML	TABS, SYRP	OTC-Covered w/Rx
	<i>allergy relief for kids</i>	5MG/5ML	SYRP	OTC-Covered w/Rx
	<i>allergy relief/nasal decongestant</i>	10MG/ 240MG	TB24	OTC-Covered w/Rx
	<i>cetirizine hcl</i>	5MG/5ML, 1MG/ML	SYRP	
	<i>cetirizine hcl</i>	5MG, 10MG	TABS, CHEW	OTC-Covered w/Rx
	<i>cetirizine hcl children's</i>	1MG/ML	SOLN	OTC-Covered w/Rx
	<i>cetirizine hcl children's allergy</i>	5MG/5ML, 1MG/ML	SYRP	OTC-Covered w/Rx
	<i>cetirizine hcl/pseudoephedrine hcl er</i>	5MG/ 120MG	TB12	OTC-Covered w/Rx
	<i>childrens loratadine</i>	5MG/5ML	SYRP	OTC-Covered w/Rx
	<i>clear-atadine children's</i>	10MG, 5MG/5ML	TBDP, SYRP	OTC-Covered w/Rx
	<i>clear-atadine d</i>	10MG/ 240MG	TB24	OTC-Covered w/Rx
	<i>loratadine</i>	10MG	TABS	OTC-Covered w/Rx
<i>loratadine hives relief</i>	5MG/5ML	SOLN	OTC-Covered w/Rx	
<b>ANTI-INFECTIVE AGENTS</b>				
Anthelmintics	<i>mebendazole</i>	100MG	CHEW	QL (6.00 per 31 days)
	<i>pin-x</i>	50MG/ML	SUSP	OTC-Covered w/Rx
Aminoglycosides	TOBI	300MG/5ML	NEBU	PA
Glycopeptides	<i>VANCOCIN HCL</i>	250MG, 125MG	CAPS	PA
	<i>vancomycin hcl</i>	750MG	SOLR	
Lincomycins	<i>CLEOCIN</i>	75MG	CAPS	
	<i>CLEOCIN PEDIATRIC GRANULES</i>	75MG/5ML	SOLR	QL (300.00 per 31 days)
	<i>clindamycin hcl</i>	300MG, 150MG	CAPS	
	<i>clindamycin phosphate</i>	900MG/6ML, 600MG/4ML, 300MG/2ML, 150MG/ML	SOLN	
First Generation Cephalosporins	<i>cefadroxil</i>	1GM, 500MG/5ML, 250MG/5ML, 500MG	TABS, SUSR, CAPS	
	<i>cefazolin sodium</i>	500MG, 1GM	SOLR	
	<i>cephalexin</i>	250MG/5ML, 125MG/5ML, 500MG, 250MG	SUSR, CAPS	
Second Generation Cephalosporins	<i>cefactor</i>	375MG/5ML, 500MG, 250MG	SUSR, CAPS	
	<i>cefprozil</i>	500MG, 250MG, 250MG/5ML, 125MG/5ML	TABS, SUSR	
	<i>cefuroxime axetil</i>	500MG, 250MG, 125MG/5ML	TABS, SUSR	
Third Generation Cephalosporins	<i>cefdinir</i>	250MG/5ML, 125MG/5ML, 300MG	SUSR, CAPS	
	<i>cefepodoxime proxetil</i>	200MG, 100MG, 50MG/5ML, 100MG/5ML	TABS, SUSR	
Erythromycins	<i>e.e.s. 400</i>	400MG	TABS	
	<i>E.E.S. GRANULES</i>	200MG/5ML	SUSR	
	<i>ERYPED 200</i>	200MG/5ML	SUSR	
	<i>ERY-TAB</i>	500MG, 333MG, 250MG	TBEC	

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	ERYTHROCIN STEARATE	500MG, 250MG	TABS	
	<i>erythromycin</i>	250MG	CPEP	
	<i>erythromycin /sulfoxazole</i>	200MG/5ML/ 600MG/5ML	SUSR	
	<i>erythromycin base</i>	500MG, 250MG	TABS	
	<i>erythromycin ethylsuccinate</i>	400MG	TABS	
Other Macrolides	<i>azithromycin</i>	200MG/5ML, 100MG/5ML, 2.5GM, 500MG, 600MG	SUSR, SOLR, TABS	
	<i>azithromycin</i>	250MG	TABS	QL (6.00 per 31 days)
	<i>clarithromycin</i>	500MG, 250MG, 250MG/5ML, 125MG/5ML	TABS, SUSR	
Natural Penicillins	BICILLIN C-R	900000UNIT/ML/ 300000UNIT/ML, 300000UNIT/ML/ 300000UNIT/ML	SUSP	
	BICILLIN L-A	600000UNIT/ML, 2400000UNIT/4ML, 1200000UNIT/2ML	SUSP	
	PENICILLIN G PROCAINE	600000UNIT/ML	SUSP	
	<i>penicillin v potassium veetids</i>	500MG, 250MG, 250MG/5ML, 125MG/5ML	TABS, SOLR	
Aminopenicillins	<i>amoclan</i>	400MG/5ML/ 57MG/5ML, 200MG/5ML/ 28.5MG/5ML	SUSR	
	<i>amoxicillin</i>	875MG, 500MG, 400MG/5ML, 250MG/5ML, 200MG/5ML, 125MG/5ML, 400MG, 250MG, 200MG, 125MG	TABS, SUSR, CHEW, CAPS	
	<i>amoxicillin/clavulanate potassium</i>	250MG/5ML/ 62.5MG/5ML	SUSR	QL (300.00 per 31 days)
	<i>amoxicillin/potassium clavulanate</i>	875MG/ 125MG, 500MG/ 125MG, 200MG/ 28.5MG, 400MG/ 57MG, 250MG/ 125MG, 400MG/5ML/ 57MG/5ML, 200MG/5ML/ 28.5MG/5ML, 600MG/5ML/ 42.9MG/5ML	TABS, CHEW, SUSR	
	<i>ampicillin</i>	250MG/5ML, 125MG/5ML, 500MG, 250MG	SUSR, CAPS	
Antimycobacterials	DAPSONE	100MG, 25MG	TABS	
Penicillinase-resistant Penicillins	<i>dicloxacillin sodium</i>	500MG, 250MG	CAPS	
	<i>oxacillin sodium</i>	2GM, 1GM, 10GM	SOLR	
Quinolones	<i>ciprofloxacin hcl</i>	750MG, 500MG, 250MG	TABS	
	LEVAQUIN	750MG, 500MG, 250MG	TABS	QL (14.00 per 31 days)
Sulfonamides	<i>sulfamethoxazole /trimethoprim</i>	800MG/20ML/ 160MG/20ML, 200MG/5ML/ 40MG/5ML	SUSP	QL (1200.00 per 31 days)
	<i>sulfamethoxazole /trimethoprim</i>	400MG/ 80MG	TABS	
	<i>sulfamethoxazole/trimethoprim ds</i>	800MG/ 160MG	TABS	
	<i>sulfasalazine</i>	500MG	TBEC, TABS	
Tetracyclines	<i>doxycycline hyclate</i>	20MG, 100MG, 50MG	TABS, SOLR, CAPS	
	<i>doxycycline monohydrate</i>	50MG, 100MG	CAPS	
	<i>minocycline hcl</i>	75MG, 50MG, 100MG	CAPS	
	<i>tetracycline hcl</i>	500MG, 250MG	CAPS	
Allylamines	<i>terbinafine hcl</i>	250MG	TABS	
Antifungals, Miscellaneous	GRIFULVIN V	500MG	TABS	
	<i>griseofulvin microsize</i>	125MG/5ML	SUSP	
	GRIS-PEG	250MG, 125MG	TABS	
Azoles	<i>fluconazole</i>	50MG, 200MG, 150MG, 100MG, 40MG/ML, 10MG/ML	TABS, SUSR	
	<i>ketoconazole</i>	200MG	TABS	
Polyenes	<i>nystatin</i>	500000UNIT, 100000UNIT/ML	TABS, SUSP	
Antituberculosis Agents	<i>ethambutol hcl</i>	400MG, 100MG	TABS	
	<i>isoniazid</i>	300MG, 100MG, 100MG/ML	TABS, SOLN	
	MYCOBUTIN	150MG	CAPS	
	<i>pyrazinamide</i>	500MG	TABS	
	<i>rifampin</i>	600MG, 300MG, 150MG	SOLR, CAPS	
Antimalarials	DARAPRIM	25MG	TABS	
	<i>hydroxychloroquine sulfate</i>	200MG	TABS	
	MALARONE	62.5MG/ 25MG, 250MG/ 100MG	TABS	
	<i>mefloquine hcl</i>	250MG	TABS	
	PRIMAQUINE PHOSPHATE	26.3MG	TABS	
Antiprotozoals, Miscellaneous	MEPRON	750MG/5ML	SUSP	
	<i>metronidazole</i>	500MG, 250MG	TABS	
Adamantanes	<i>rimantadine hcl</i>	100MG	TABS	
HIV Entry and Fusion Inhibitors	FUZEON	90MG	KIT	
	SELZENTRY	300MG, 150MG	TABS	
HIV Protease Inhibitors	APTIVUS	250MG	CAPS	

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	CRIVAN	400MG, 333MG, 200MG, 100MG	CAPS	
	INVIRASE	500MG, 200MG	TABS, CAPS	
	KALETRA	200MG/ 50MG, 100MG/ 25MG,	TABS, SOLN	
		400MG/5ML/ 100MG/5ML		
	LEXIVA	50MG/ML	SUSP	
	LEXIVA	700MG	TABS	QL (124.00 per 31 days)
	NORVIR	80MG/ML, 100MG	SOLN, CAPS, TABS	
	PREZISTA	75MG, 600MG, 400MG, 150MG	TABS	
	REYATAZ	300MG, 200MG, 150MG, 100MG	CAPS	QL (62.00 per 31 days)
	VIRACEPT	50MG/GM	POWD	
	VIRACEPT	250MG	TABS	QL (310.00 per 31 days)
	Integrase Inhibitors	ISENTRESS	400MG	TABS
Nonnucleoside Reverse Transcriptase Inhibitors	INTELENCE	100MG	TABS	
	RESCRIPTOR	200MG, 100MG	TABS	
	SUSTIVA	600MG, 50MG, 200MG	TABS, CAPS	
	VIRAMUNE	200MG, 50MG/5ML	TABS, SUSP	
	Nucleoside and Nucleotide Reverse Transcriptase Inhibitors	COMBIVIR	150MG/ 300MG	TABS
<i>didanosine</i>		400MG, 250MG, 200MG, 125MG	CPDR	
EMTRIVA		200MG	CAPS	QL (31.00 per 31 days)
EMTRIVA		10MG/ML	SOLN	QL (170.00 per 31 days)
EPIVIR		300MG, 150MG, 10MG/ML	TABS, SOLN	
EPIVIR HBV		100MG, 5MG/ML	TABS, SOLN	
EPZICOM		600MG/ 300MG	TABS	QL (31.00 per 31 days)
<i>stavudine</i>		1MG/ML, 40MG, 30MG, 20MG, 15MG	SOLR, CAPS	
TRIZIVIR		300MG/ 150MG/ 300MG	TABS	QL (62.00 per 31 days)
TRUVADA		200MG/ 300MG	TABS	QL (31.00 per 31 days)
VIDEX PEDIATRIC		4GM, 2GM	SOLR	
VIREAD		300MG	TABS	
ZIAGEN		300MG, 20MG/ML	TABS, SOLN	
<i>zidovudine</i>		300MG, 50MG/5ML, 100MG	TABS, SYRP, CAPS	
Miscellaneous Antiretrovirals		ATRIPLA	600MG/ 200MG/ 300MG	TABS
Interferons	PEGASYS	180MCG/ML, 180MCG/0.5ML	SOLN, KIT	PA
Monoclonal Antibodies	SYNAGIS	50MG/0.5ML, 100MG/ML	SOLN	PA
Neuraminidase Inhibitors	RELENZA DISKHALER	5MG/BLISTER	AEPB	
	TAMIFLU	12MG/ML, 75MG, 45MG, 30MG	SUSR, CAPS	
Nucleosides and Nucleotides	<i>acyclovir</i>	200MG, 800MG, 400MG	TABS, CAPS	
	<i>acyclovir</i>	200MG/5ML	SUSP	QL (3500.00 per 31 days)
	BARACLUDE	1MG, 0.5MG	TABS	PA
	GANCICLOVIR	500MG, 250MG	CAPS	
	<i>ribavirin</i>	200MG	TABS	
	<i>valacyclovir hcl</i>	500MG, 1000MG	TABS	QL (62.00 per 31 days)
Urinary Anti-infectives	<i>nitrofurantoin macrocrystalline</i>	50MG, 100MG	CAPS	
	<i>nitrofurantoin monohydrate</i>	100MG	CAPS	
	<i>trimethoprim</i>	100MG	TABS	
	URETRON D/S	0.12MG/ 120MG/ 10.8MG/ 36.2MG/ 40.8MG	TABS	
	<i>uticap</i>	0.12MG/ 120MG/ 10MG/ 36MG/ 40.8MG	CAPS	
	<b>ANTINEOPLASTIC AGENTS</b>			
Antineoplastic Agents	<i>adriamycin</i>	50MG, 20MG, 10MG, 2MG/ML	SOLR, SOLN	PA
	<i>adrucil</i>	50MG/ML	SOLN	PA
	ALKERAN	2MG	TABS	PA
	ARIMIDEX	1MG	TABS	PA
	AVASTIN	400MG/16ML, 100MG/4ML	SOLN	PA
	<i>bleomycin sulfate</i>	30UNIT, 15UNIT	SOLR	PA
	BUSULFEX	6MG/ML	SOLN	PA
	<i>carboplatin</i>	50MG, 450MG, 150MG, 600MG/60ML, 50MG/5ML, 450MG/45ML, 150MG/15ML	SOLR, SOLN	PA
	CEENU	40MG, 10MG, 100MG	CAPS	PA
	<i>cisplatin</i>	50MG/50ML, 200MG/200ML, 100MG/100ML	SOLN	PA
	COSMEGEN	0.5MG	SOLR	PA
	CYCLOPHOSPHAMIDE	50MG, 25MG, 500MG, 2GM, 1GM	TABS, SOLR	PA
	<i>daunorubicin hcl</i>	20MG, 5MG/ML	SOLR, INJ	PA
	DAUNOXOME	2MG/ML	INJ	PA
	<i>doxorubicin hcl</i>	2MG/ML	SOLN	PA
	ELIGARD	7.5MG, 45MG, 30MG, 22.5MG	KIT	PA

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	ELOXATIN	50MG/10ML, 200MG/40ML, 100MG/20ML	SOLN	PA
	EMCYT	140MG	CAPS	PA
	<i>etoposide</i>	20MG/ML, 50MG	SOLN, CAPS	PA
	<i>fluorouracil</i>	5GM/100ML, 50MG/ML, 500MG/10ML, 2.5GM/50ML, 1GM/20ML	SOLN	PA
	GEMZAR	200MG, 1GM	SOLR	PA
	GLEEVEC	400MG, 100MG	TABS	PA
	HEXALEN	50MG	CAPS	PA
	<i>hydroxyurea</i>	500MG	CAPS	PA
	IXEMPRA KIT	45MG, 15MG	SOLR	PA
	LEUKERAN	2MG	TABS	PA
	LYSODREN	500MG	TABS	PA
	<i>megestrol acetate</i>	40MG/ML	SUSP	QL (600.00 per 31 days)
	<i>megestrol acetate</i>	40MG, 20MG	TABS	
	<i>melphalan hydrochloride</i>	50MG	SOLR	PA
	<i>mercaptopurine</i>	50MG	TABS	
	<i>methotrexate</i>	2.5MG	TABS	
	<i>methotrexate sodium</i>	1GM, 50MG/2ML, 25MG/ML, 250MG/10ML, 1GM/40ML	SOLR, SOLN	PA
	<i>mitomycin</i>	5MG, 40MG, 20MG	SOLR	PA
	MYLERAN	2MG	TABS	PA
	<i>oxaliplatin</i>	50MG, 100MG, 50MG/10ML, 100MG/20ML	SOLR, SOLN	PA
	SPRYCEL	70MG, 50MG, 20MG, 100MG	TABS	PA
	SUTENT	50MG, 25MG, 12.5MG	CAPS	PA
	TABLOID	40MG	TABS	PA
	<i>tamoxifen citrate</i>	20MG, 10MG	TABS	
	TARCEVA	25MG, 150MG, 100MG	TABS	PA
	TASIGNA	200MG	CAPS	PA
	TEMODAR	5MG, 250MG, 20MG, 180MG, 140MG, 100MG	CAPS	PA
	<i>toposar</i>	20MG/ML	SOLN	PA
	TRELSTAR DEPOT	3.75MG	SUSR	PA
	TRELSTAR DEPOT MIXJECT	3.75MG	SUSR	PA
	TRELSTAR LA	11.25MG	SUSR	PA
	TRELSTAR LA MIXJECT	11.25MG	SUSR	PA
	TRELSTAR MIXJECT	22.5MG	SUSR	PA
	TYKERB	250MG	TABS	PA
	VINBLASTINE SULFATE	10MG, 1MG/ML	SOLR, SOLN	PA
	<i>vincristine sulfate</i>	1MG/ML	SOLN	PA
	<i>vinorelbine tartrate</i>	50MG/5ML, 10MG/ML	SOLN	PA
	XELODA	500MG, 150MG	TABS	PA
<b>AUTONOMIC DRUGS</b>				
Antimuscarinics/ Antispasmodics	ATROVENT HFA	17MCG/ACT	AERS	
	<i>dicyclomine hcl</i>	20MG, 10MG/ML, 10MG/5ML, 10MG	TABS, SOLN, CAPS	
	<i>hyomax -dt</i>	0.375MG	TBCR	
	<i>hyomax-ft</i>	0.125MG	TBDP	
	<i>hyomax-sl</i>	0.125MG	SUBL	
	<i>hyomax-sr</i>	0.375MG	TB12	
	<i>hyoscyamine</i>	0.15MG	TABS	
	<i>hyoscyamine sulfate</i>	0.125MG, 0.375MG, 0.125MG/ML, 0.125MG/5ML	TBDP, TB12, TABS, SOLN, ELIX	
	<i>hyoscyamine sulfate tr</i>	0.375MG	TB12	
	<i>ipratropium bromide</i>	0.02%	SOLN	QL (480.00 per 31 days)
	<i>ipratropium bromide</i>	0.06%, 0.03%	SOLN	
	<i>propantheline bromide</i>	15MG	TABS	
	<i>symax fastabs</i>	0.125MG	TBDP	
	<i>symax-sr</i>	0.375MG	TB12	
Autonomic Drugs, Miscellaneous	<i>nicotine</i>	7MG/24HR, 21MG/24HR, 14MG/24HR	PT24	OTC-Covered w/RX; Max 3 months per year
Parasympathomimetic Cholinergic	ARICEPT	5MG, 10MG	TABS	
	ARICEPT ODT	5MG, 10MG	TBDP	
	<i>bethanechol chloride</i>	5MG, 50MG, 25MG, 10MG	TABS	
	EXELON	6MG, 4.5MG, 3MG, 1.5MG, 9.5MG/24HR, 4.6MG/24HR	CAPS, PT24	
	MESTINON	60MG/5ML	SYRP	
	MESTINON TIMESPAN	180MG	TBCR	
	<i>pilocarpine hydrochloride</i>	5MG, 7.5MG	TABS	
	PROSTIGMIN	15MG	TABS	
	<i>pyridostigmine bromide</i>	60MG	TABS	

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Centrally Acting Skeletal Muscle Relaxants	<i>carisoprodol</i>	350MG	TABS	
	<i>carisoprodol /aspirin</i>	200MG/ 325MG	TABS	
	<i>chlorzoxazone</i>	500MG	TABS	
	<i>cyclobenzaprine hcl</i>	5MG, 10MG	TABS	
	<i>methocarbamol</i>	750MG, 500MG	TABS	
Direct-acting Skeletal Muscle Relaxants	<i>dantrolene sodium</i>	50MG, 25MG, 100MG	CAPS	
GABA-derivative Skeletal Muscle Relaxants	<i>baclofen</i>	20MG, 10MG	TABS	
Neuromuscular Blocking Agents	<i>tizanidine hcl</i>	4MG, 2MG	TABS	
Sympatholytic Adrenergic Blocking	<i>ergoloid mesylates</i>	1MG	TABS	
	ERGOMAR	2MG	SUBL	
Sympathomimetic Adrenergic	LUSONAL	7.5MG/5ML	LIQD	AL (max: 20y)
	ADVAIR DISKUS	500MCG/DOSE/ 50MCG/DOSE, 250MCG/DOSE/ 50MCG/DOSE, 100MCG/DOSE/ 50MCG/DOSE	AEPB	
	ADVAIR HFA	45MCG/ACT/ 21MCG/ACT, 230MCG/ACT/ 21MCG/ACT, 115MCG/ACT/ 21MCG/ACT	AERO	
	<i>albuterol sulfate</i>	0.083%	NEBU	QL (720.00 per 31 days)
	<i>albuterol sulfate</i>	0.5%	NEBU	QL (60.00 per 31 days)
	<i>albuterol sulfate</i>	1.25MG/3ML, 0.63MG/3ML	NEBU	QL (300.00 per 31 days)
	<i>albuterol sulfate</i>	4MG, 2MG, 2MG/5ML	TABS, SYRP	
	<i>albuterol sulfate er</i>	8MG, 4MG	TB12	
	COMBIVENT	103MCG/ACT/ 18MCG/ACT	AERO	
	<i>ipratropium bromide/albuterol sulfate</i>	2.5MG/3ML/ 0.5MG/3ML	SOLN	QL (720.00 per 31 days)
	<i>metaproterenol sulfate</i>	10MG/5ML	SYRP	
	<i>midodrine hcl</i>	2.5MG, 5MG, 10MG	TABS	
	SEREVENT DISKUS	50MCG/DOSE	AEPB	
		80MCG/ACT/ 4.5MCG/ACT, 160MCG/ACT/ 4.5MCG/ACT	AERO	
	<i>terbutaline sulfate</i>	5MG, 2.5MG, 1MG/ML	TABS, SOLN	
	VENTOLIN HFA	108MCG/ACT	AERS	
	<i>epinephrine</i>	0.3MG/0.3ML	DEVI	QL (2.00 per 31 days)
	<i>epinephrine 2-pak</i>	0.3MG/0.3ML	DEVI	QL (2.00 per 31 days)
	EPIPEN-JR	1:2000	DEVI	QL (2.00 per 31 days)
	EPIPEN-JR 2-PAK	1:2000	DEVI	QL (2.00 per 31 days)
<i>pseudoephedrine hcl</i>	60MG, 30MG, 30MG/5ML	TABS, SYRP	AL (max: 20y); OTC-Covered w/Rx	
<b>BLOOD FORMATION, COAGULATION &amp; THROMBOSIS</b>				
Iron Preparations	<i>centratex</i>	10MG/ 0.8MG/ 15MCG/ 106MG/ 1MG/ 6.9MG/ 1.3MG/ 30MG/ 5MG/ 6MG/ 200MG/ 10MG/ 18.2MG	CAPS	
	FEOSOL	200MG	TABS	OTC-Covered w/Rx
	<i>ferrex 150</i>	150MG	CAPS	OTC-Covered w/Rx
	<i>ferrex 150</i>	150MG	CAPS	
	<i>ferrex 150 forte</i>	25MCG/ 1MG/ 150MG	CAPS	
	<i>ferrous sulfate</i>	325MG, 324MG, 220MG/5ML	TBEC, TABS, ELIX	OTC-Covered w/Rx
	<i>ferrous sulfate cr</i>	160MG	TBCR	OTC-Covered w/Rx
	<i>myferon 150 forte</i>	25MCG/ 1MG/ 150MG	CAPS	
	<i>poly-iron 150 forte</i>	25MCG/ 1MG/ 150MG	CAPS	
		10MG/ 0.8MG/ 15MCG/ 324MG/ 1MG/ 6.9MG/ 1.3MG/ 30MG/ 5MG/ 6MG/ 200MG/ 10MG/ 18.2MG	CAPS	
Hemostatics	ALPHANINE SD	1500UNIT	SOLR	
	PROFILNINE SD	1500UNIT, 1000UNIT	SOLR	
Coumarin Derivatives	<i>jantoven</i>	7.5MG, 6MG, 5MG, 4MG, 3MG, 2MG, 2.5MG, 1MG, 10MG	TABS	
	<i>warfarin sodium</i>	7.5MG, 6MG, 5MG, 4MG, 3MG, 2MG, 2.5MG, 1MG, 10MG	TABS	
Heparins	LOVENOX	100MG/ML, 150MG/ML	SOLN	QL (28.00 per 31 days)
	LOVENOX	120MG/0.8ML, 80MG/0.8ML	SOLN	QL (22.40 per 31 days)
	LOVENOX	300MG/3ML	SOLN	QL (24.00 per 31 days)
	LOVENOX	40MG/0.4ML, 30MG/0.3ML	SOLN	QL (8.40 per 31 days)
	LOVENOX	60MG/0.6ML	SOLN	QL (16.80 per 31 days)
Miscellaneous Anticoagulants	ARIXTRA	10MG/0.8ML	SOLN	QL (8.00 per 31 days)
	ARIXTRA	2.5MG/0.5ML	SOLN	QL (5.00 per 31 days)
	ARIXTRA	5MG/0.4ML	SOLN	QL (4.00 per 31 days)
	ARIXTRA	7.5MG/0.6ML	SOLN	QL (6.00 per 31 days)
Platelet-Aggregation Inhibitors	PLAVIX	75MG	TABS	

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Class	Product Name	Strengths	Form	Coverage Detail
Platelet-reducing Agents	<i>anagrelide hydrochloride</i>	1MG, 0.5MG	CAPS	
Hematopoietic Agents	NEUPOGEN	480MCG/1.6ML, 480MCG/0.8ML, 300MCG/ML, 300MCG/0.5ML	SOLN	PA
	PROCRIT	4000UNIT/ML, 40000UNIT/ML, 3000UNIT/ML, 2000UNIT/ML, 20000UNIT/ML, 10000UNIT/ML	SOLN	PA
Hemorrhologic Agents	<i>pentoxifylline er</i>	400MG	TBCR	
<b>CARDIOVASCULAR DRUGS</b>				
alpha-Adrenergic Blocking Agents	<i>doxazosin mesylate</i>	8MG, 4MG, 2MG, 1MG	TABS	
	<i>prazosin hcl</i>	5MG, 2MG, 1MG	CAPS	
	<i>terazosin hcl</i>	5MG, 2MG, 1MG, 10MG	CAPS	
Bile Acid Sequestrants	<i>cholestyramine</i>	4GM/DOSE, 4GM	POWD, PACK	
	<i>cholestyramine light</i>	4GM	PACK	
	<i>cholestyramine light</i>	4GM/DOSE	POWD	QL (756.00 per 31 days)
Fibric Acid Derivatives	<i>fenofibrate</i>	54MG, 160MG	TABS	
	<i>fenofibrate micronized</i>	67MG, 200MG, 134MG	CAPS	
	<i>gemfibrozil</i>	600MG	TABS	
HMG-CoA Reductase Inhibitors	<i>lovastatin</i>	40MG, 20MG, 10MG	TABS	
	<i>pravastatin sodium</i>	80MG, 40MG, 20MG, 10MG	TABS	
	<i>simvastatin</i>	80MG, 5MG, 40MG, 20MG, 10MG	TABS	
beta-Adrenergic Blocking Agents	<i>atenolol</i>	50MG, 25MG, 100MG	TABS	
	<i>atenolol/chlorthalidone</i>	50MG/ 25MG, 100MG/ 25MG	TABS	
	<i>bisoprolol fumarate</i>	5MG, 10MG	TABS	
	<i>bisoprolol fumarate/hydrochlorothiazide</i>	5MG/ 6.25MG, 2.5MG/ 6.25MG, 10MG/ 6.25MG	TABS	
	<i>carvedilol</i>	6.25MG, 3.125MG, 25MG, 12.5MG	TABS	
	<i>labetalol hcl</i>	300MG, 200MG, 100MG, 5MG/ML	TABS, SOLN	
	<i>metoprolol succinate er</i>	50MG, 25MG, 200MG, 100MG	TB24	
	<i>metoprolol tartrate</i>	50MG, 25MG, 100MG, 1MG/ML	TABS, SOLN	
	<i>nadolol</i>	80MG, 40MG, 20MG, 160MG	TABS	
	<i>pinidolol</i>	5MG, 10MG	TABS	
	<i>propranolol/ hydrochlorothiazide</i>	80MG/ 25MG, 40MG/ 25MG	TABS	
	<i>propranolol hcl</i>	80MG, 60MG, 40MG, 20MG, 10MG, 1MG/ML	TABS, SOLN	
	<i>propranolol hcl er</i>	80MG, 60MG, 160MG, 120MG	CP24	
	<i>sorine</i>	80MG, 240MG, 160MG, 120MG	TABS	
	<i>sotalol hcl</i>	80MG, 240MG, 160MG, 120MG	TABS	
<i>sotalol hcl (af)</i>	80MG, 160MG, 120MG	TABS		
<i>timolol maleate</i>	5MG, 20MG, 10MG	TABS		
Calcium-Channel Blocking Agents, Misc	<i>cartia xt</i>	300MG, 240MG, 180MG, 120MG	CP24	
	<i>diltiazem cd</i>	300MG, 240MG, 180MG, 120MG	CP24	
	<i>diltiazem hcl</i>	90MG, 60MG, 30MG, 120MG, 50MG/10ML, 25MG/5ML, 125MG/25ML, 360MG, 300MG, 240MG, 180MG	TABS, SOLN, CP24	
	<i>diltiazem hcl er</i>	420MG, 300MG, 240MG, 180MG, 120MG, 90MG, 60MG	CP24, CP12	
	<i>verapamil hcl</i>	80MG, 40MG, 120MG	TABS	
	<i>verapamil hcl er</i>	240MG, 180MG, 120MG, 300MG, 200MG, 100MG	TBCR, CP24	
	<i>verapamil hcl sr</i>	240MG, 360MG, 180MG, 120MG	TBCR, CP24	
Dihydropyridines	<i>amlodipine besylate</i>	5MG, 2.5MG, 10MG	TABS	
	<i>amlodipine besylate/benazepril hydrochloride</i>	5MG/ 20MG, 5MG/ 10MG, 2.5MG/ 10MG, 10MG/ 20MG	CAPS	
	<i>nifediac cc</i>	90MG, 60MG, 30MG	TB24	
	<i>nifedical xl</i>	60MG, 30MG	TB24	
	<i>nifedipine</i>	10MG	CAPS	
	<i>nifedipine er</i>	90MG, 60MG, 30MG	TB24	
Class Ia Antiarrhythmics	<i>disopyramide phosphate</i>	150MG, 100MG	CAPS	
	NORPACE CR	150MG	CP12	
	<i>procainamide hcl</i>	500MG/ML, 100MG/ML	SOLN	
	<i>quinidine gluconate</i>	80MG/ML	SOLN	
	<i>quinidine gluconate cr</i>	324MG	TBCR	
	<i>quinidine gluconate er</i>	324MG	TBCR	
	<i>quinidine gluconate sa</i>	324MG	TBCR	
	<i>quinidine sulfate</i>	300MG	TABS	
Class Ib Antiarrhythmics	<i>lidocaine hcl</i>	20MG/ML	SOLN	
	<i>mexiletine hcl</i>	250MG, 200MG, 150MG	CAPS	
Class Ic Antiarrhythmics	<i>flecainide acetate</i>	50MG, 150MG, 100MG	TABS	
	<i>propafenone hcl</i>	150MG	TABS	
Class III Antiarrhythmics	<i>amiodarone hcl</i>	400MG, 200MG, 50MG/ML, 450MG/9ML	TABS, SOLN	

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Class	Product Name	Strengths	Form	Coverage Detail
Cardiotonic Agents	<i>digoxin</i>	0.25MG, 0.125MG, 0.25MG/ML, 0.05MG/ML	TABS, SOLN	
Central Alpha-Agonists	<i>clonidine hcl</i>	0.3MG, 0.2MG, 0.1MG	TABS	
	<i>guanfacine hcl</i>	2MG, 1MG	TABS	
	<i>methyldopa</i>	500MG, 250MG	TABS	
	<i>methyldopa/ hydrochlorothiazide</i>	25MG/ 250MG, 15MG/ 250MG	TABS	
Direct Vasodilators	<i>hydralazine hcl</i>	50MG, 25MG, 10MG, 100MG, 20MG/ML	TABS, SOLN	
	<i>minoxidil</i>	2.5MG, 10MG	TABS	
Angiotensin II Receptor Antagonists	<i>losartan potassium</i>	50MG, 25MG, 100MG	TABS	QL (31.00 per 31 days); ST; Must fail preferred ACE inhibitor
	<i>losartan potassium/ hydrochlorothiazide</i>	100MG/25MG, 100MG/12.5MG, 50MG/12.5MG	TABS	QL (31.00 per 31 days); ST; Must fail preferred ACE inhibitor
	MICARDIS	80MG, 40MG, 20MG	TABS	QL (31.00 per 31 days); ST; Must fail preferred ACE inhibitor
	MICARDIS HCT	80MG/ 25MG, 80MG/ 12.5MG, 40MG/ 12.5MG	TABS	QL (31.00 per 31 days); ST; Must fail preferred ACE inhibitor
Angiotensin-Converting Enzyme Inhibitors	<i>benazepril hcl</i>	5MG, 40MG, 20MG, 10MG	TABS	
	<i>benazepril hcl/hydrochlorothiazide</i>	5MG/ 6.25MG, 20MG/ 25MG, 20MG/ 12.5MG, 10MG/ 12.5MG	TABS	
	<i>captopril</i>	50MG, 25MG, 12.5MG, 100MG	TABS	
	<i>captopril /hydrochlorothiazide</i>	50MG/ 25MG, 50MG/ 15MG, 25MG/ 25MG, 25MG/ 15MG	TABS	
	<i>enalapril maleate</i>	5MG, 20MG, 2.5MG, 10MG	TABS	
	<i>enalapril maleate/hydrochlorothiazide</i>	5MG/ 12.5MG, 10MG/ 25MG	TABS	
	<i>lisinopril</i>	5MG, 40MG, 30MG, 20MG, 2.5MG, 10MG	TABS	
	<i>lisinopril /hydrochlorothiazide</i>	20MG/ 25MG, 20MG/ 12.5MG, 10MG/ 12.5MG	TABS	
Mineralocorticoid Aldost	<i>spironolactone</i>	50MG, 25MG, 100MG	TABS	
	<i>spironolactone /hydrochlorothiazide</i>	25MG/ 25MG	TABS	
Nitrates and Nitrites	<i>isosorbide dinitrate</i>	5MG, 30MG, 20MG, 10MG, 5MG, 2.5MG	TABS, SUBL	
	<i>isosorbide dinitrate er</i>	40MG	TBCR	
	<i>isosorbide mononitrate</i>	20MG, 10MG	TABS	
	<i>isosorbide mononitrate er</i>	60MG, 30MG, 120MG	TB24	
	<i>nitroglycerin</i>	0.6MG, 0.4MG, 0.3MG, 0.6MG/HR, 0.4MG/HR, 0.2MG/HR	SUBL, PT24	
	<i>nitroglycerin transdermal</i>	0.6MG/HR, 0.4MG/HR, 0.2MG/HR, 0.1MG/HR	PT24	
	NITROSTAT	0.6MG, 0.4MG, 0.3MG	SUBL	
Phosphodiesterase Inhibitors	ADCIRCA	20MG	TABS	PA
Vasodilating Agents, Miscellaneous	<i>dipyridamole</i>	75MG, 50MG, 25MG, 5MG/ML	TABS, SOLN	
	LETAIRIS	5MG	TABS	PA
<b>CENTRAL NERVOUS SYSTEM AGENTS</b>				
Analgesics and Antipyretics, Misc	<i>anolor 300</i>	50MG/325MG/ 40MG	CAPS	
	<i>bupap</i>	50MG/ 650MG	TABS	
	<i>butalbital /acetaminophen /caffeine</i>	50MG/ 500MG/ 40MG, 50MG/325MG/ 40MG	TABS, CAPS	
	<i>butalbital/acetaminophen</i>	50MG/ 325MG	TABS	
	<i>cephadyn</i>	50MG/ 650MG	TABS	
	<i>margesic</i>	50MG/325MG/ 40MG	CAPS	
	<i>marten-tab</i>	50MG/ 325MG	TABS	
	<i>repan</i>	50MG/325MG/ 40MG	TABS	
	<i>tencet</i>	50MG/325MG/ 40MG	CAPS	
	<i>zebutal</i>	500MG/ 50MG/ 40MG	CAPS	
Cyclooxygenase-2 (COX-2) Inhibitors	CELEBREX	50MG, 400MG, 200MG, 100MG	CAPS	QL (31.00 per 31 days); ST; Must fail preferred NSAID
Salicylates	<i>aspirin</i>	81MG, 325MG, 600MG, 300MG	TABS, SUPP, CHEW	OTC-Covered w/Rx
	<i>aspirin children's</i>	81MG	CHEW	OTC-Covered w/Rx
	<i>aspirin low dose</i>	81MG	TABS	OTC-Covered w/Rx
	<i>butalbital /aspirin /caffeine</i>	50MG/ 325MG/ 40MG	TABS, CAPS	
	<i>butalbital compound</i>	50MG/ 325MG/ 40MG	TABS, CAPS	
	<i>children's aspirin</i>	81MG	CHEW	OTC-Covered w/Rx
	<i>children's aspirin low strength</i>	81MG	CHEW	OTC-Covered w/Rx
	<i>choline magnesium trisalicylate</i>	750MG, 500MG, 1000MG, 500MG/5ML	TABS, LIQD	
<i>salsalate</i>	750MG, 500MG	TABS		
Other Nonsteroidal Anti-inflammatory Agents	<i>children's ibuprofen</i>	40MG/ML, 100MG/5ML	SUSP	OTC-Covered w/Rx
	<i>diclofenac potassium</i>	50MG	TABS	

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Class	Product Name	Strengths	Form	Coverage Detail
	<i>diclofenac sodium</i>	75MG	TBEC	
	<i>diclofenac sodium dr</i>	50MG	TBEC	
	<i>diclofenac sodium ec</i>	50MG, 25MG	TBEC	
	<i>diclofenac sodium er</i>	100MG	TB24	
	<i>diclofenac sodium xr</i>	100MG	TB24	
	DIFLUNISAL	500MG	TABS	
	<i>etodolac</i>	500MG, 400MG, 300MG, 200MG	TABS, CAPS	
	<i>fenoprofen calcium</i>	600MG	TABS	
	<i>flurbiprofen</i>	50MG, 100MG	TABS	
	<i>ibuprofen</i>	100MG/5ML, 200MG	SUSP, TABS	OTC-Covered w/Rx
	<i>ibuprofen</i>	100MG/5ML, 800MG, 600MG, 400MG	SUSP, TABS	
	<i>indomethacin</i>	50MG, 25MG	CAPS	
	<i>ketoprofen</i>	75MG, 50MG	CAPS	
	<i>ketorolac tromethamine</i>	10MG	TABS	QL (20.00 per 31 days)
	<i>meloxicam</i>	7.5MG, 15MG, 7.5MG/5ML	TABS, SUSP	
	<i>nabumetone</i>	750MG, 500MG	TABS	
	<i>naproxen</i>	125MG/5ML	SUSP	QL (2000.00 per 31 days)
	<i>naproxen</i>	500MG, 375MG, 250MG	TABS	
	<i>naproxen dr</i>	500MG	TBEC	
	<i>naproxen sodium</i>	550MG, 275MG	TABS	
	<i>oxaprozin</i>	600MG	TABS	
	<i>piroxicam</i>	20MG, 10MG	CAPS	
	<i>sulindac</i>	200MG, 150MG	TABS	
	<i>tolmetin sodium</i>	400MG	CAPS	
Opiate Agonists	<i>acetaminophen /codeine</i>	300MG/ 60MG, 300MG/ 15MG, 120MG/5ML/ 12MG/5ML	TABS, SOLN	
	<i>acetaminophen/codeine #2</i>	300MG/ 15MG	TABS	
	<i>acetaminophen/codeine #3</i>	300MG/ 30MG	TABS	
	<i>acetaminophen/codeine #4</i>	300MG/ 60MG	TABS	
	<i>ascomp/codeine</i>	50MG/ 325MG/ 40MG/ 30MG	CAPS	
	<i>butal /asa /caff /cod</i>	50MG/ 325MG/ 40MG/ 30MG	CAPS	
	<i>butalbital /apap /caffeine /codeine</i>	50MG/ 325MG/ 40MG/ 30MG	CAPS	
	<i>codeine phosphate</i>	30MG/ML, 15MG/ML	SOLN	
	<i>codeine sulfate</i>	60MG, 30MG	TABS	
	<i>co-gesic</i>	5MG/ 500MG	TABS	QL (248.00 per 31 days)
	DILAUDID-5	1MG/ML	LIQD	
	<i>endocet</i>	7.5MG/ 500MG, 7.5MG/ 325MG, 5MG/ 325MG, 10MG/ 325MG	TABS	QL (248.00 per 31 days)
	<i>endodan</i>	325MG/ 4.5MG/ 0.38MG	TABS	QL (248.00 per 31 days)
	<i>fentanyl</i>	75MCG/HR, 50MCG/HR, 25MCG/HR, 12MCG/HR, 100MCG/HR	PT72	PA; QL (10.00 per 31 days)
	<i>hydrocodone /acetaminophen</i>	7.5MG/ 750MG, 7.5MG/ 650MG, 7.5MG/ 500MG, 7.5MG/ 325MG, 5MG/ 500MG, 5MG/ 325MG, 2.5MG/ 500MG, 10MG/ 660MG, 10MG/ 650MG, 10MG/ 500MG, 10MG/ 325MG, 500MG/15ML/ 7.5MG/15ML	TABS, SOLN	QL (248.00 per 31 days)
	<i>hydrocodone /acetaminophen-hs</i>	2.5MG/ 500MG	TABS	QL (248.00 per 31 days)
	<i>hydrocodone bitartrate/acetaminophen</i>	10MG/ 750MG	TABS	QL (248.00 per 31 days)
	<i>hydrogesic</i>	5MG/ 500MG	CAPS	QL (248.00 per 31 days)
	<i>hydromorphone hcl</i>	8MG, 4MG, 2MG, 3MG	TABS, SUPP	
	<i>margesic-h</i>	5MG/ 500MG	CAPS	QL (248.00 per 31 days)
	<i>meperidine hcl</i>	50MG, 100MG, 50MG/5ML	TABS, SOLN	
	<i>meperitab</i>	50MG, 100MG	TABS	
	<i>methadone hcl</i>	40MG, 5MG, 10MG, 5MG/5ML, 10MG/5ML, 10MG/ML	TBSO, TABS, SOLN, CONC	
	METHADONE HCL INTENSOL	10MG/ML	CONC	
	<i>methadose</i>	40MG, 5MG, 10MG, 10MG/ML	TBSO, TABS, CONC	
	<i>morphine sulfate</i>	30MG, 15MG, 5MG, 20MG, 10MG, 8MG/ML, 5MG/ML, 50MG/ML, 25MG/ML, 20MG/ML, 20MG/5ML, 1MG/ML, 15MG/ML, 10MG/ML, 10MG/5ML, 0.5MG/ML	TABS, SUPP, SOLN	
	<i>morphine sulfate cr</i>	60MG, 30MG, 200MG, 15MG, 100MG	TB12	
	<i>morphine sulfate dilute-a-jet</i>	25MG/ML	SOLN	
	<i>morphine sulfate er</i>	60MG, 30MG, 200MG, 15MG, 100MG	TB12	
	<i>oxycodone /acetaminophen</i>	7.5MG/ 325MG, 5MG/ 325MG, 10MG/ 325MG, 7.5MG/ 500MG, 5MG/ 500MG	TABS, CAPS	QL (248.00 per 31 days)
	<i>oxycodone /aspirin</i>	325MG/ 4.5MG/ 0.38MG	TABS	QL (248.00 per 31 days)
	<i>oxycodone hcl</i>	5MG, 30MG, 15MG, 5MG/5ML, 20MG/ML, 5MG	CAPS, TABS, SOLN, CONC	QL (248.00 per 31 days)
	<i>propoxyphene /acetaminophen</i>	65MG/ 650MG	TABS	
	<i>propoxyphene hcl</i>	65MG	CAPS	
	<i>propoxyphene-n /acetaminophen</i>	50MG/ 325MG, 100MG/ 650MG, 100MG/ 500MG	TABS	

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Class	Product Name	Strengths	Form	Coverage Detail
	<i>roxicet</i>	5MG/ 325MG	TABS	QL (248.00 per 31 days)
	<i>tramadol hcl</i>	50MG	TABS	
Opiate Partial Agonists	<i>buprenorphine hcl</i>	8MG, 2MG	SUBL	PA
	<i>butorphanol tartrate</i>	10MG/ML	SOLN	QL (3.00 per 31 days)
	<i>pentazocine/naloxone hcl</i>	0.5MG/ 50MG	TABS	
	SUBOXONE	8MG/ 2MG, 2MG/ 0.5MG	SUBL	PA
Amphetamines	ADDERALL XR	5MG, 10MG, 15MG, 20MG, 25MG, 30MG	CP24	QL (31.00 per 31 days)
	<i>amphetamine /dextroamphetamine</i>	5MG, 10MG, 20MG, 30MG	TABS	
	<i>dextroamphetamine sulfate</i>	5MG, 10MG	TABS	
	<i>dextroamphetamine sulfate er</i>	5MG, 15MG, 10MG	CP24	
Anorexigenics & Resp & Cereb Stim, Misc	CONCERTA	36MG, 27MG, 18MG	TBCR	QL (62.00 per 31 days)
	CONCERTA	54MG	TBCR	QL (31.00 per 31 days)
	<i>dexmethylphenidate hcl</i>	5MG, 2.5MG, 10MG	TABS	QL (62.00 per 31 days)
	<i>methylin</i>	5MG, 20MG, 10MG, 2.5MG	TABS, CHEW	
	<i>methylin er</i>	20MG, 10MG	TBCR	
	<i>methylphenidate hcl</i>	5MG, 20MG, 10MG	TABS	
	<i>methylphenidate hcl sr</i>	20MG	TBCR	
Anticonvulsants, Miscellaneous	<i>carbamazepine</i>	100MG	CHEW	QL (310.00 per 31 days)
	<i>carbamazepine</i>	100MG/5ML	SUSP	QL (2500.00 per 31 days)
	<i>carbamazepine</i>	200MG	TABS	QL (248.00 per 31 days)
	CARBATROL	100MG	CP12	QL (310.00 per 31 days)
	CARBATROL	200MG	CP12	QL (248.00 per 31 days)
	CARBATROL	300MG	CP12	
	<i>divalproex sodium</i>	250MG, 125MG	TBEC, TB24, CPSP	QL (310.00 per 31 days)
	<i>divalproex sodium</i>	500MG	TBEC, TB24	QL (261.00 per 31 days)
	<i>epitol</i>	200MG	TABS	QL (248.00 per 31 days)
	<i>fosphenytoin sodium</i>	100MG PE/2ML	SOLN	
	<i>gabapentin</i>	100MG	CAPS	QL (310.00 per 31 days)
	<i>gabapentin</i>	300MG	CAPS	QL (372.00 per 31 days)
	<i>gabapentin</i>	400MG	CAPS	QL (279.00 per 31 days)
	<i>gabapentin</i>	800MG, 600MG	TABS	
	GABITRIL	16MG, 12MG	TABS	
	GABITRIL	4MG, 2MG	TABS	QL (310.00 per 31 days)
	KEPPRA	500MG/5ML	SOLN	
	<i>lamotrigine</i>	5MG, 25MG	CHEW, TABS	QL (310.00 per 31 days)
	<i>lamotrigine</i>	200MG, 150MG, 100MG	TABS	
	<i>lamotrigine starter/not taking carbamazepine</i>		KIT	
	<i>lamotrigine starter/taking carbamazepine/not taking valproate</i>		KIT	
	<i>levetiracetam</i>	100MG/ML	SOLN	QL (4500.00 per 31 days)
	<i>levetiracetam</i>	1000MG, 750MG, 500MG	TABS	
	<i>levetiracetam</i>	250MG	TABS	QL (372.00 per 31 days)
	NEURONTIN	250MG/5ML	SOLN	QL (2500.00 per 31 days)
	<i>oxcarbazepine</i>	300MG/5ML	SUSP	QL (1500.00 per 31 days)
	<i>oxcarbazepine</i>	150MG	TABS	QL (310.00 per 31 days)
	<i>oxcarbazepine</i>	300MG	TABS	QL (248.00 per 31 days)
	<i>oxcarbazepine</i>	600MG	TABS	
	<i>topiramate</i>	100MG, 25MG, 15MG, 50MG	TABS, CPSP	QL (310.00 per 31 days);FDA APPROVED INDICATIONS ONLY
	<i>topiramate</i>	200MG	TABS, CPSP	QL (248.00 per 31 days);FDA APPROVED INDICATIONS ONLY
	<i>valproic acid</i>	250MG	CAPS	QL (310.00 per 31 days)
	<i>valproic acid</i>	250MG/5ML	SYRP	QL (2600.00 per 31 days)
	<i>zonisamide</i>	100MG	CAPS	
	<i>zonisamide</i>	25MG	CAPS	QL (310.00 per 31 days)
	<i>zonisamide</i>	50MG	CAPS	QL (372.00 per 31 days)
Barbiturates	<i>primidone</i>	250MG	TABS	QL (248.00 per 31 days)
	<i>primidone</i>	50MG	TABS	QL (310.00 per 31 days)
Benzodiazepines	<i>clonazepam</i>	2MG, 1MG, 0.5MG	TABS	
	<i>clonazepam orally disintegrating</i>	2MG, 1MG, 0.5MG, 0.25MG, 0.125MG	TBDP	
Hydantoin	DILANTIN	30MG	CAPS	QL (310.00 per 31 days)
	DILANTIN INFATABS	50MG	CHEW	QL (372.00 per 31 days)
	PEGANONE	250MG	TABS	QL (372.00 per 31 days)
	<i>phenytoin</i>	125MG/5ML	SUSP	QL (900.00 per 31 days)
	<i>phenytoin sodium</i>	50MG/ML	SOLN	
	<i>phenytoin sodium extended</i>	300MG, 200MG, 100MG	CAPS	
Succinimides	<i>ethosuximide</i>	250MG	CAPS	
	<i>ethosuximide</i>	250MG/5ML	SOLN	QL (1000.00 per 31 days)
Antimanic Agents	<i>lithium carbonate</i>	300MG, 600MG, 150MG	TABS, CAPS	
	<i>lithium carbonate er</i>	450MG, 300MG	TBCR	
	<i>lithium citrate</i>	8MEQ/5ML	SYRP, SOLN	

# WellCare Health Plan Florida Medicaid Preferred Drug List

Class	Product Name	Strengths	Form	Coverage Detail
Antimigraine Agents, Miscellaneous	<i>ergotamine tartrate/caffeine</i>	1MG/ 100MG	TABS	
Selective Serotonin Agonists	<i>sumatriptan</i>	5MG/ACT, 20MG/ACT	SOLN	QL (12.00 per 31 days)
	<i>sumatriptan succinate</i>	50MG, 25MG, 100MG, 6MG/0.5ML, 4MG/0.5ML	TABS, SOLN, KIT	QL (9.00 per 31 days)
	<i>sumatriptan succinate refill</i>	6MG/0.5ML, 4MG/0.5ML	KIT	QL (9.00 per 31 days)
	TREXIMET	500MG/ 85MG	TABS	PA
Adamantanes	<i>amantadine hcl</i>	50MG/5ML, 100MG	SYRP, CAPS	
Anticholinergic Agents	<i>benztropine mesylate</i>	2MG, 1MG, 0.5MG	TABS	
	<i>trihexyphenidyl hcl</i>	5MG, 2MG, 0.4MG/ML	TABS, ELIX	
Dopamine Precursors	<i>carbidopa /levodopa</i>	25MG/ 250MG, 25MG/ 100MG, 10MG/ 100MG	TABS	
	<i>carbidopa/levodopa cr</i>	25MG/ 100MG	TBCR	
	<i>carbidopa/levodopa er</i>	50MG/ 200MG, 25MG/ 100MG	TBCR	
	<i>carbidopa/levodopa sr</i>	50MG/ 200MG, 25MG/ 100MG	TBCR	
Ergot-derivative Dopamine Receptor Agonists	<i>bromocriptine mesylate</i>	2.5MG, 5MG	TABS, CAPS	
Nonergot-derivative Dopamine Receptor Agonists	<i>pramipexole dihydrochloride</i>	1MG, 1.5MG, 0.5MG, 0.25MG, 0.125MG	TABS	
	<i>ropinirole hcl</i>	5MG, 4MG, 3MG, 2MG, 1MG, 0.5MG, 0.25MG	TABS	
Monoamine Oxidase B Inhibitors	<i>selegiline hcl</i>	5MG, 5MG	TABS, CAPS	
Anxiolytics, Sedatives, & Hypnotics Misc	<i>buspirone hcl</i>	7.5MG, 5MG, 30MG, 15MG, 10MG	TABS	
	<i>hydroxyzine hcl</i>	50MG, 25MG, 10MG, 10MG/5ML	TABS, SYRP	
	<i>hydroxyzine pamoate</i>	50MG, 25MG, 100MG	CAPS	
	<i>meprobamate</i>	400MG, 200MG	TABS	
	<i>zolpidem tartrate</i>	5MG, 10MG	TABS	QL (31.00 per 31 days)
Barbiturates	<i>phenobarbital</i>	20MG/5ML	ELIX	QL (2000.00 per 31 days)
	<i>phenobarbital</i>	100MG, 97.2MG, 64.8MG, 60MG, 32.4MG, 30MG	TABS	
	<i>phenobarbital</i>	15MG	TABS	QL (310.00 per 31 days)
	<i>phenobarbital</i>	16.2MG	TABS	QL (383.00 per 31 days)
	<i>phenobarbital sodium</i>	65MG/ML, 130MG/ML	SOLN	
Benzodiazepines	<i>alprazolam</i>	2MG, 1MG, 0.5MG, 0.25MG	TABS	
	<i>chlordiazepoxide hcl</i>	5MG, 25MG, 10MG	CAPS	
	<i>clorazepate dipotassium</i>	7.5MG, 3.75MG, 15MG	TABS	
	DIASTAT ACUDIAL	20MG, 10MG	GEL	PA; QL (3.00 per 31 days)
	DIASTAT PEDIATRIC	2.5MG	GEL	PA; QL (3.00 per 31 days)
	<i>diazepam</i>	5MG, 2MG, 10MG, 5MG/ML, 1MG/ML	TABS, SOLN	
	<i>estazolam</i>	2MG, 1MG	TABS	
	<i>lorazepam</i>	2MG, 1MG, 0.5MG, 4MG/ML, 2MG/ML	TABS, SOLN	
	<i>oxazepam</i>	30MG, 15MG, 10MG	CAPS	
	<i>temazepam</i>	30MG, 15MG	CAPS	
	<i>triazolam</i>	0.25MG, 0.125MG	TABS	
Central Nervous System Agents, Misc	CAMPRAL	333MG	TBEC	QL (186.00 per 31 days)
	NAMENDA	5MG, 10MG, 10MG/5ML	TABS, SOLN	
	NAMENDA TITRATION PAK		TABS	
Opiate Antagonists	<i>naltrexone hcl</i>	50MG	TABS	
Monoamine Oxidase Inhibitors	NARDIL	15MG	TABS	
	<i>tranylcypromine sulfate</i>	10MG	TABS	
Selective Serotonin- and Norepinephrine-reuptake Inhibitors	<i>venlafaxine hcl</i>	75MG, 50MG, 37.5MG, 25MG, 100MG	TABS	
	VENLAFAXINE HCL ER	75MG, 37.5MG, 225MG, 150MG	TB24	QL (31.00 per 31 days); ST; Must fail preferred Venlafaxine
Selective Serotonin-reuptake Inhibitors	<i>citalopram hydrobromide</i>	40MG, 20MG, 10MG, 10MG/5ML	TABS, SOLN	
	<i>fluoxetine hcl</i>	20MG/5ML, 20MG, 10MG	SOLN, CAPS	
	<i>paroxetine hcl</i>	40MG, 30MG, 20MG, 10MG, 10MG/5ML	TABS, SUSP	
	<i>sertraline hcl</i>	50MG, 25MG, 100MG, 20MG/ML	TABS, CONC	
Serotonin Modulators	<i>nefazodone hcl</i>	50MG, 250MG, 200MG, 150MG, 100MG	TABS	
	<i>trazodone hcl</i>	50MG, 300MG, 150MG, 100MG	TABS	
Tricyclics and Other Norepinephrine-reuptake Inhibitors	<i>amitriptyline hcl</i>	75MG, 50MG, 25MG, 150MG, 10MG, 100MG	TABS	
	AMOXAPINE	50MG, 25MG, 150MG, 100MG	TABS	

UPPERCASE=Brand Medications Lowercase italics=Generic Medication

Coverage Detail: PA=Prior Authorization ST= Step Edit AL= Age Limit requirement QL= Quantity Limit

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Class	Product Name	Strengths	Form	Coverage Detail
	<i>chlordiazepoxide /amitriptyline</i>	5MG/ 12.5MG, 10MG/ 25MG	TABS	
	<i>clomipramine hcl</i>	75MG, 50MG, 25MG	CAPS	
	<i>desipramine hcl</i>	75MG, 50MG, 25MG, 150MG, 10MG, 100MG	TABS	
	<i>doxepin hcl</i>	10MG/ML, 75MG, 50MG, 25MG, 10MG, 100MG	CONC, CAPS	
	<i>imipramine hcl</i>	50MG, 25MG, 10MG	TABS	
	<i>maprotiline hcl</i>	75MG, 50MG, 25MG	TABS	
	<i>nortriptyline hcl</i>	10MG/5ML, 75MG, 50MG, 25MG, 10MG	SOLN, CAPS	
	<i>perphenazine/ amitriptyline</i>	4MG/ 50MG, 4MG/ 25MG, 4MG/ 10MG, 2MG/ 25MG, 2MG/ 10MG	TABS	
	<i>protriptyline hcl</i>	5MG, 10MG	TABS	
	Miscellaneous Antidepressants	<i>budeprion sr</i>	150MG, 100MG	TB12
<i>budeprion xl</i>		300MG, 150MG	TB24	
<i>bupropion hcl</i>		75MG, 100MG	TABS	
<i>bupropion hcl sr</i>		200MG, 150MG, 100MG	TB12	
<i>bupropion hcl xl</i>		300MG	TB24	
<i>mirtazapine</i>		15MG, 7.5MG, 45MG, 30MG	TBDP, TABS	
<i>mirtazapine odt</i>		45MG, 30MG	TBDP	
Atypical Antipsychotics	<i>clozapine</i>	50MG, 25MG, 200MG, 100MG	TABS	
	FAZACLO	12.5MG	TBDP	QL (31.00 per 31 days)
	RISPERDAL CONSTA	50MG, 37.5MG, 25MG, 12.5MG	SUSR	PA; AL (min: 12y); QL (2.00 per 31 days)
	<i>risperidone</i>	4MG, 3MG, 2MG, 1MG, 0.5MG, 0.25MG, 1MG/ML	TABS, SOLN	AL (min: 10y); QL (62.00 per 31 days)
	<i>risperidone m-tab</i>	4MG, 3MG, 2MG, 1MG, 0.5MG	TBDP	AL (min: 10y); QL (62.00 per 31 days)
	<i>risperidone odt</i>	4MG, 3MG, 2MG, 1MG, 0.5MG, 0.25MG	TBDP	AL (min: 10y); QL (62.00 per 31 days)
	SEROQUEL	50MG, 400MG, 300MG, 25MG, 200MG, 100MG	TABS	PA
Butyrophenones	<i>haloperidol</i>	5MG, 2MG, 1MG, 10MG, 0.5MG, 2MG/ML	TABS, CONC	
	<i>haloperidol decanoate</i>	50MG/ML, 100MG/ML	SOLN	
	<i>haloperidol lactate</i>	5MG/ML	SOLN	
Phenothiazines	<i>chlorpromazine hcl</i>	50MG, 25MG, 200MG, 10MG, 100MG	TABS	
	<i>fluphenazine decanoate</i>	25MG/ML	SOLN	
	<i>fluphenazine hcl</i>	5MG/ML	CONC	QL (2500.00 per 31 days)
	<i>fluphenazine hcl</i>	5MG, 2.5MG, 1MG, 10MG, 2.5MG/5ML	TABS, ELIX	
	<i>perphenazine</i>	8MG, 4MG, 2MG, 16MG	TABS	
	<i>prochlorperazine</i>	25MG	SUPP	
	<i>prochlorperazine maleate</i>	5MG, 10MG	TABS	
	<i>thioridazine hcl</i>	50MG, 25MG, 10MG, 100MG	TABS	
	<i>trifluoperazine hcl</i>	5MG, 2MG, 1MG, 10MG	TABS	
Thioxanthenes	<i>thiothixene</i>	5MG, 2MG, 1MG, 10MG	CAPS	
Miscellaneous Antipsychotics	<i>loxapine succinate</i>	5MG, 50MG, 25MG, 10MG	CAPS	
	ORAP	2MG, 1MG	TABS	
<b>DEVICES</b>				
Devices	ACCU-CHEK ACTIVE CARE KIT		KIT	QL (2.00 per 365 days);OTC-Covered w/Rx
	ACCU-CHEK ACTIVE GLUCOSE CONTROL SOLUTION		LIQD	OTC-Covered w/Rx
	ACCU-CHEK ADVANTAGE DIABETES CARE KIT		KIT	QL (2.00 per 365 days);OTC-Covered w/Rx
	ACCU-CHEK AVIVA		KIT	QL (2.00 per 365 days);OTC-Covered w/Rx
	ACCU-CHEK COMFORT CURVE CONTROL SOLUTION (2 LEVELS)		SOLN	OTC-Covered w/Rx
	ACCU-CHEK COMPACT GLUCOSE CONTROL SOLUTION		LIQD	OTC-Covered w/Rx
	ACCU-CHEK COMPACT PLUS CARE KIT		KIT	QL (2.00 per 365 days);OTC-Covered w/Rx
	ACCU-CHEK MULTICLIX LANCET DEVICE KIT		KIT	OTC-Covered w/Rx
	ACCU-CHEK SOFTCLIX LANCET DEVICE		MISC	OTC-Covered w/Rx
	AEROCHAMBER PLUS		MISC	QL (2.00 per 365 days)
	AEROCHAMBER PLUS/LARGE MASK		MISC	QL (2.00 per 365 days)
	AEROCHAMBER PLUS/MASK		MISC	QL (2.00 per 365 days)
	AEROCHAMBER PLUS/SMALL MASK		MISC	QL (2.00 per 365 days)
	ALCOHOL SWABS		PADS	OTC-Covered w/Rx
	E-Z SPACER		DEVI	QL (2.00 per 365 days)

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Class	Product Name	Strengths	Form	Coverage Detail
	FREESTYLE FREEDOM LITE		KIT	QL (2.00 per 365 days);OTC-Covered w/Rx
	FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM		DEVI	QL (2.00 per 365 days);OTC-Covered w/Rx
	INSULIN SYRINGES		MISC	QL (100.00 per 31 days);OTC-Covered w/Rx
	LANCETS		MISC	Accu-Chek Multiclix lancets: QL (204.00 per 31 days);OTC Covered w/Rx; All other lancets: QL (200.00 per 31 days);OTC Covered w/Rx
	MICROCHAMBER		MISC	QL (2.00 per 365 days)
	MICROSPACER		MISC	QL (2.00 per 365 days)
	OPTICHAMBER ADVANTAGE		MISC	QL (2.00 per 365 days)
	OPTICHAMBER ADVANTAGE/LARGE MASK		MISC	QL (2.00 per 365 days)
	OPTICHAMBER ADVANTAGE/MEDIUM FACE MASK		MISC	QL (2.00 per 365 days)
	OPTICHAMBER ADVANTAGE/SMALL FACE MASK		MISC	QL (2.00 per 365 days)
	OPTICHAMBER FACE MASK/LARGE		MISC	QL (2.00 per 365 days);OTC-Covered w/Rx
	OPTICHAMBER FACE MASK/MEDIUM		MISC	QL (2.00 per 365 days);OTC-Covered w/Rx
	OPTICHAMBER FACE MASK/SMALL		MISC	QL (2.00 per 365 days);OTC-Covered w/Rx
	OPTIHALER		MISC	QL (2.00 per 365 days)
	PEAK AIR PEAK FLOW METER ADULT/PEDIATRIC		DEVI	QL (2.00 per 365 days);OTC-Covered w/Rx
	PEAK FLOW METER		DEVI	QL (2.00 per 365 days);OTC-Covered w/Rx
	PEN NEEDLES		MISC	OTC-Covered w/Rx
	POCKET PEAK FLOW METER		DEVI	QL (2.00 per 365 days);OTC-Covered w/Rx
	POCKETPEAK PEAK FLOW METER LOW RANGE		DEVI	QL (2.00 per 365 days);OTC-Covered w/Rx
	POCKETPEAK PEAK FLOW METER/UNIVERSAL RANGE		DEVI	QL (2.00 per 365 days);OTC-Covered w/Rx
	PRECISION XTRA		DEVI	QL (2.00 per 365 days);OTC-Covered w/Rx
	TRUZONE PEAK FLOW METER		DEVI	QL (2.00 per 365 days)
	VORTEX HOLDING CHAMBER/MASK/ADULT		DEVI	QL (2.00 per 365 days)
	VORTEX HOLDING CHAMBER/MASK/CHILDS		DEVI	QL (2.00 per 365 days)
	VORTEX HOLDING CHAMBER/MASK/TODDLER		DEVI	QL (2.00 per 365 days)
	VORTEX VALVED HOLDING CHAMBER		DEVI	QL (2.00 per 365 days)
	ZOEY PERSONAL BEST FULL RANGE PEAK FLOW METER		DEVI	QL (2.00 per 365 days);OTC-Covered w/Rx
	ZOEY PERSONAL BEST LOW RANGE PEAK FLOW METER		DEVI	QL (2.00 per 365 days);OTC-Covered w/Rx
<b>DIAGNOSTIC AGENTS</b>				
Diabetes Mellitus	ACCU-CHEK ACTIVE STRIPS		STRP	QL (100.00 per 31 days);OTC-Covered w/Rx
	ACCU-CHEK AVIVA		STRP	QL (100.00 per 31 days);OTC-Covered w/Rx
	ACCU-CHEK COMFORT CURVE TEST STRIPS		STRP	QL (100.00 per 31 days);OTC-Covered w/Rx
	ACCU-CHEK COMPACT STRIPS		STRP	QL (102.00 per 31 days);OTC-Covered w/Rx
	ACCU-CHEK COMPACT TEST DRUM		STRP	QL (102.00 per 31 days);OTC-Covered w/Rx
	FREESTYLE LITE TEST STRIPS		STRP	QL (100.00 per 31 days);OTC-Covered w/Rx
	FREESTYLE TEST STRIPS		STRP	QL (100.00 per 31 days);OTC-Covered w/Rx
	PRECISION XTRA BLOOD GLUCOSE TEST STRIPS		STRP	QL (100.00 per 31 days);OTC-Covered w/Rx
Ketones	KETOSTIX		STRP	QL (100.00 per 31 days);OTC-Covered w/Rx
Sugar	CLINISTIX		STRP	QL (100.00 per 31 days);OTC-Covered w/Rx
	DIASTIX		STRP	QL (100.00 per 31 days);OTC-Covered w/Rx
<b>ELECTROLYTIC, CALORIC, AND WATER BALANCE</b>				
Alkalinizing Agents	<i>cytra-2</i>	334MG/5ML/ 500MG/5ML	SOLN	QL (3600.00 per 31 days)

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Class	Product Name	Strengths	Form	Coverage Detail
	<i>cytra-3</i>	334MG/5ML/ 550MG/5ML/ 500MG/5ML	SYRP	QL (3600.00 per 31 days)
	<i>liqui-dualcitra</i>	334MG/5ML/ 500MG/5ML	SOLN	QL (3600.00 per 31 days)
	<i>sodium citrate</i>		GRAN	OTC-Covered w/Rx
Ammonia Detoxicants	<i>lactulose</i>	10GM/15ML	SOLN	QL (2000.00 per 31 days)
Loop Diuretics	<i>bumetanide</i>	2MG, 1MG, 0.5MG, 0.25MG/ML	TABS, SOLN	
	<i>furosemide</i>	80MG, 40MG, 20MG, 8MG/ML, 10MG/ML	TABS, SOLN	
Potassium-sparing Diuretics	<i>amiloride /hydrochlorothiazide</i>	5MG/ 50MG	TABS	
	<i>triamterene /hydrochlorothiazide</i>	75MG/ 50MG, 37.5MG/ 25MG, 50MG/ 25MG, 37.5MG/ 25MG	TABS, CAPS	
Thiazide Diuretics	<i>chlorothiazide</i>	500MG, 250MG	TABS	
	<i>hydrochlorothiazide</i>	50MG, 25MG, 12.5MG	TABS, CAPS	
Thiazide-like Diuretics	<i>chlorthalidone</i>	50MG, 25MG	TABS	
	<i>indapamide</i>	2.5MG, 1.25MG	TABS	
	<i>metolazone</i>	5MG, 2.5MG, 10MG	TABS	
Phosphate-removing Agents	FOSRENOL	750MG, 500MG, 1000MG	CHEW	
Potassium-removing Agents	<i>kionex</i>		POWD	
	<i>sodium polystyrene sulfonate</i>	50GM/200ML, 30GM/120ML	SUSP, POWD	
	<i>sps</i>	15GM/60ML	SUSP	
Irrigating Solutions	<i>curity sterile saline</i>	0.9%	SOLN	
	<i>sodium chloride</i>	0.9%	SOLN	
	<i>sodium chloride 0.9%</i>	0.9%	SOLN	
Replacement Preparations	<i>bd posiflush</i>	0.9%	SOLN	QL (310.00 per 31 days)
	<i>calcium acetate</i>	667MG	CAPS	QL (360.00 per 31 days)
	<i>calcium carbonate</i>	600MG, 1500MG, 1250MG, 1250MG/5ML	TABS, SUSP	OTC-Covered w/Rx
	<i>calcium carbonate/vitamin d</i>	600MG/ 400UNIT, 600MG/ 125UNIT	TABS	OTC-Covered w/Rx
	<i>calcium lactate</i>	650MG	TABS	OTC-Covered w/Rx
	CAL-LAC	500MG	CAPS	OTC-Covered w/Rx
	<i>ed k+10</i>	10MEQ	TBCR	
	ELIPHOS	667MG	TABS	QL (360.00 per 31 days)
	<i>kaon-cl-10</i>	10MEQ	TBCR	
	<i>klor-con</i>	20MEQ	PACK	
	<i>klor-con 10</i>	10MEQ	TBCR	
	<i>klor-con 8</i>	8MEQ	TBCR	
	<i>klor-con m10</i>	10MEQ	TBCR	
	<i>klor-con m20</i>	20MEQ	TBCR	
	NEUTRA-PHOS	250MG/75ML/ 278MG/75ML/ 164MG/75ML	SOLR	OTC-Covered w/Rx
	<i>normal saline flush</i>	0.9%	SOLN	QL (310.00 per 31 days)
	<i>oralyte</i>	35MEQ/L/ 30MEQ/L/ 25GM/L/ 20MEQ/L/ 45MEQ/L	SOLN	QL (4000.00 per 31 days);OTC-Covered w/Rx
	<i>oralyte freezer pops</i>	35MEQ/L/ 30MEQ/L/ 25GM/L/ 20MEQ/L/ 45MEQ/L	SOLN	QL (4000.00 per 31 days);OTC-Covered w/Rx
	<i>potassium chloride</i>	40MEQ/100ML, 30MEQ/100ML, 2MEQ/ML, 10MEQ/100ML, 0.4MEQ/ML, 20MEQ, 20%, 10%	SOLN, PACK, LIQD	
	<i>potassium chloride 0.15% nacl 0.9%</i>	20MEQ/L/ 0.9%	SOLN	PA
	<i>potassium chloride 0.15% w/nacl 0.9% viaflex</i>	20MEQ/L/ 0.9%	SOLN	PA
	<i>potassium chloride 0.3%/nacl 0.9%/viaflex</i>	40MEQ/L/ 0.9%	SOLN	PA
	<i>potassium chloride cr</i>	10MEQ	TBCR	
	<i>potassium chloride er</i>	8MEQ, 20MEQ, 10MEQ	TBCR, CPCR	
	<i>potassium chloride sr</i>	8MEQ	TBCR	
	<i>potassium phosphate</i>	3MMOLE/ML	SOLN	PA
	<i>rehydralyte</i>	65MEQ/L/ 30MEQ/L/ 25GM/L/ 20MEQ/L/ 75MEQ/L	SOLN	QL (4000.00 per 31 days);OTC-Covered w/Rx
	<i>revital freezer pops</i>	35MEQ/L/ 30MEQ/L/ 25GM/L/ 20MEQ/L/ 45MEQ/L	SOLN	QL (4000.00 per 31 days);OTC-Covered w/Rx
	<i>revital jell cups</i>	35MEQ/L/ 30MEQ/L/ 25GM/L/ 20MEQ/L/ 45MEQ/L	SOLN	QL (4000.00 per 31 days);OTC-Covered w/Rx
	<i>revital liquid squeezers</i>	35MEQ/L/ 30MEQ/L/ 25GM/L/ 20MEQ/L/ 45MEQ/L	SOLN	QL (4000.00 per 31 days);OTC-Covered w/Rx
	<i>saline flush</i>	0.9%	SOLN	QL (310.00 per 31 days)
	<i>sodium chloride</i>	0.9%	SYRINGE	QL (310.00 per 31 days)
	<i>sodium chloride</i>	0.9%	SOLN, VIAL	
Uricosuric Agents	<i>probenecid</i>	500MG	TABS	
	<i>probenecid/colchicine</i>	500MG/0.5MG	TABS	
<b>ENZYMES</b>				
Enzymes	PULMOZYME	1MG/ML	SOLN	PA

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Class	Product Name	Strengths	Form	Coverage Detail	
<b>EYE, EAR, NOSE &amp; THROAT PREPARATIONS</b>					
Antiallergic Agents	<i>alaway</i>	0.025%	SOLN	OTC-Covered w/Rx	
	ASTELIN	137MCG/SPRAY	SOLN		
	<i>cromolyn sodium</i>	5.2MG/ACT	AERS	OTC-Covered w/Rx	
	<i>cromolyn sodium</i>	4%	SOLN		
	<i>ketotifen fumarate</i>	0.025%	SOLN	OTC-Covered w/Rx	
alpha-Adrenergic Agonists	ALPHAGAN P	0.1%	SOLN		
	<i>brimonidine tartrate</i>	0.2%	SOLN		
beta-Adrenergic Blocking Agents	BETAXOLOL HCL	0.5%	SOLN		
	BETOPTIC-S	0.25%	SUSP		
	<i>carteolol hcl</i>	1%	SOLN		
	<i>levobunolol hcl</i>	0.5%, 0.25%	SOLN		
	<i>metipranolol</i>	0.3%	SOLN		
	<i>timolol maleate</i>	0.5%, 0.25%	SOLN		
	<i>timolol maleate ophthalmic gel forming</i>	0.5%, 0.25%	SOLG		
Carbonic Anhydrase Inhibitors	<i>acetazolamide</i>	250MG, 125MG	TABS		
	AZOPT	1%	SUSP		
	<i>dorzolamide hcl</i>	2%	SOLN		
	<i>dorzolamide hcl/timolol maleate</i>	2%/ 0.5%	SOLN		
	<i>methazolamide</i>	50MG, 25MG	TABS		
Prostaglandin Analogs	LUMIGAN	0.03%	SOLN	QL (2.50 per 31 days)	
	TRAVATAN	0.004%	SOLN	QL (5.00 per 31 days)	
	TRAVATAN Z	0.004%	SOLN	QL (5.00 per 31 days)	
Antibacterials	<i>ak-poly-bac</i>	500UNIT/GM/ 10000UNIT/GM	OINT		
	<i>ak-tob</i>	0.3%	SOLN		
	<i>bacitracin/polymyxin b</i>	500UNIT/GM/ 10000UNIT/GM	OINT		
	<i>ciprofloxacin hcl oph</i>	0.3%	SOLN		
	<i>erythromycin</i>	5MG/GM	OINT		
	<i>gentak</i>	0.3%	SOLN		
	<i>gentamicin sulfate</i>	0.3%	SOLN		
	<i>neocin-pg</i>	0.025MG/ML/ 2.5MG/ML/ 10000UNIT/ML	SOLN		
	<i>neomycin /bacitracin /polymyxin</i>	400UNIT/GM/ 5MG/GM/ 10000UNIT/GM	OINT		
	<i>neomycin /polymyxin /gramicidin</i>	0.025MG/ML/ 1.75MG/ML/ 10000UNIT/ML	SOLN		
	<i>ofloxacin otic</i>	0.3%	SOLN		
	<i>polycin b</i>	500UNIT/GM/ 10000UNIT/GM	OINT		
	<i>polymyxin b sulfate/trimethoprim sulfate</i>	10000UNIT/ML/ 0.1%	SOLN		
	<i>sulfacetamide sodium</i>	10%	SOLN		
	<i>tobramycin sulfate</i>	0.3%	SOLN		
	<i>tobrasol</i>	0.3%	SOLN		
	<i>trifluridine</i>	1%	SOLN		
	EENT Anti-infectives, Miscellaneous	<i>auro eardrops</i>	6.5%	SOLN	OTC-Covered w/Rx
<i>chlorhexadine gluconate oral rinse</i>		0.12%	SOLN	QL (480.00 per 31 days)	
<i>ear drops earwax removal aid</i>		6.5%	SOLN	OTC-Covered w/Rx	
<i>ear wax drops</i>		6.5%	SOLN	OTC-Covered w/Rx	
<i>e-r-o ear drops</i>		6.5%	SOLN	OTC-Covered w/Rx	
<i>e-r-o ear wax removal system</i>		6.5%	SOLN	OTC-Covered w/Rx	
<i>h.e.a.r.</i>		6.5%	SOLN	OTC-Covered w/Rx	
<i>murine for ear wax removal system</i>		6.5%	SOLN	OTC-Covered w/Rx	
<i>oral peroxide</i>		10%	SOLN	OTC-Covered w/Rx	
<i>periogard</i>		0.12%	SOLN	QL (480.00 per 31 days)	
<i>perisol</i>		0.12%	SOLN	QL (480.00 per 31 days)	
<i>thera-ear</i>		6.5%	SOLN	OTC-Covered w/Rx	
Corticosteroids		<i>cortomycin</i>	1%/ 3.5MG/ML/ 10000UNIT/ML	SUSP, SOLN	
		<i>dexamethasone sodium phosphate</i>	0.1%	SOLN	
		<i>dexasol</i>	0.1%	SOLN	
	<i>dexasporin</i>	0.1%/ 0.5%/ 10000UNIT/ML	SUSP		
	<i>flunisolide</i>	29MCG/ACT, 0.025%	SOLN		
	<i>fluorometholone</i>	0.1%	SUSP		
	<i>fluor-op</i>	0.1%	SUSP		
	<i>fluticasone propionate</i>	50MCG/ACT	SUSP		
	FML FORTE	0.25%	SUSP		
	LOTEMAX	0.5%	SUSP		
	MAXIDEX	0.1%	SUSP		
	<i>methadex</i>	1MG/ML/ 3.5MG/ML/ 10000UNIT/ML	SUSP		
	<i>neomycin /polymyxin /dexamethasone</i>	0.1%/ 5MG/ML/ 10000UNIT/ML, 0.1%/ 5MG/GM/ 10000UNIT/GM, 0.1%/ 0.35%/ 10000UNIT/GM	SUSP, OINT		
	<i>neomycin /polymyxin /hydrocortisone</i>	1%/ 3.5MG/ML/ 10000UNIT/ML	SUSP, SOLN		

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Class	Product Name	Strengths	Form	Coverage Detail
	<i>poly-dex</i>	0.1% / 0.5% / 10000UNIT/ML, 0.1% / 0.5% / 10000UNIT/GM	SUSP, OINT	
	POLY-PRED	0.35% / 10000UNIT/ML / 0.5%	SUSP	
	PRED-G	0.3% / 1%	SUSP	
	<i>prednisolone acetate</i>	1%	SUSP	
	<i>prednisolone sodium phosphate</i>	1%	SOLN	
	<i>sulfacetamide sodium/prednisolone sodium phosphate</i>	0.23% / 10%	SOLN	
	TOBRADEX	0.1% 0.3%	OINT	
	VEXOL	1%	SUSP	
EENT Anti-inflammatory Agents, Misc	RESTASIS	0.05%	EMUL	
Nonsteroidal Anti-inflammatory Agents	<i>flurbiprofen sodium</i>	0.03%	SOLN	
	<i>ketorolac tromethamine</i>	0.5%, 0.4%	SOLN	
Contact Lens Solutions	<i>multi purpose saline</i>	0.9%	SOLN	OTC-Covered w/Rx
EENT Drugs, Miscellaneous	<i>acetic acid/aluminum acetate</i>	2%	SOLN	
	<i>optics eye wash</i>	0.9%	SOLN	OTC-Covered w/Rx
Local Anesthetics	<i>antipyrine /benzocaine</i>	54MG/ML/ 14MG/ML, 5.4%/ 1.4%	SOLN	
	<i>auroguard</i>	54MG/ML/ 14MG/ML	SOLN	
	<i>chloroxylonol /pramoxine</i>	1MG/ML/ 10MG/ML	LIQD	
	<i>lidocaine viscous</i>	2%	SOLN	
	PR OTIC SOLUTION	0.01% / 5.4% / 1.4% / 0.01%	SOLN	
	<i>re chlorphenylcaine</i>	5% / 5% / 0.25%	SOLN	
Mydriatics	<i>ak-pentolate</i>	1%	SOLN	
	<i>atropine sulfate</i>	1%	SOLN, OINT	
	<i>cyclopentolate hcl</i>	1%	SOLN	
	<i>cylate</i>	1%	SOLN	
	ISOPTO HYOSCINE	0.25%	SOLN	
Vasoconstrictors	<i>ak-con</i>	0.1%	SOLN	
	<i>naphazoline hcl</i>	0.1%	SOLN	
	NAPHCON	0.012%	SOLN	OTC-Covered w/Rx
	NAPHCON-A	0.025% / 0.3%	SOLN	OTC-Covered w/Rx
	OPCON-A	0.027% / 0.315%	SOLN	OTC-Covered w/Rx
	VASOCLEAR	0.02%	SOLN	OTC-Covered w/Rx
<b>GASTROINTESTINAL DRUGS</b>				
Antacids and Adsorbents	<i>alternagel</i>	600MG/5ML	SUSP	OTC-Covered w/Rx
	<i>aluminum hydroxide</i>	320MG/5ML	SUSP	OTC-Covered w/Rx
	<i>calcium carbonate</i>	500MG	CHEW	OTC-Covered w/Rx
Antidiarrhea Agents	<i>diphenoxylate /atropine</i>	0.025MG/ 2.5MG, 0.025MG/5ML / 2.5MG/5ML	TABS, LIQD	
	<i>lonox</i>	0.025MG / 2.5MG	TABS	
	<i>loperamide hcl</i>	2MG	CAPS	
	<i>paregoric</i>	2MG/5ML	TINC	
5-HT3 Receptor Antagonists	<i>ondansetron hcl</i>	4MG/5ML	SOLN	QL (300.00 per 31 days)
	<i>ondansetron hcl</i>	24MG	TABS	QL (31.00 per 31 days)
	<i>ondansetron hcl</i>	8MG, 4MG	TABS	QL (62.00 per 31 days)
	<i>ondansetron odt</i>	8MG, 4MG	TBDP	QL (62.00 per 31 days)
Antihistamines	<i>meclizine hcl</i>	12.5MG, 25MG	TABS	OTC-Covered w/Rx
	<i>meclizine hcl</i>	12.5MG, 25MG	TABS	
	<i>medi-meclizine</i>	25MG	TABS	OTC-Covered w/Rx
	<i>travel sickness</i>	25MG	CHEW	OTC-Covered w/Rx
Anti-inflammatory Agents	ASACOL	400MG	TBEC	ST; Must fail preferred Sulfasalazine
	<i>balsalazide disodium</i>	750MG	CAPS	
	<i>mesalamine</i>	4GM	ENEM	QL (1800.00 per 31 days)
Histamine H2-Antagonists	<i>acid reducer</i>	75MG	TABS	OTC-Covered w/Rx
	<i>cimetidine</i>	200MG	TABS	OTC-Covered w/Rx
	<i>cimetidine</i>	800MG, 400MG, 300MG, 200MG	TABS	
	<i>cimetidine hcl</i>	300MG/5ML, 150MG/ML	SOLN	
	<i>famotidine</i>	10MG/ML, 40MG, 20MG	SOLN, TABS	
	<i>famotidine</i>	10MG	TABS	OTC-Covered w/Rx
	<i>famotidine premixed</i>	0.4MG/ML / 0.9%	SOLN	
	<i>ranitidine 75</i>	75MG	TABS	OTC-Covered w/Rx
	<i>ranitidine hcl</i>	50MG/2ML, 25MG/ML, 150MG/6ML, 300MG, 150MG	SOLN, TABS	
	<i>ranitidine hcl</i>	15MG/ML	SYRP	QL (600.00 per 31 days)
	<i>ranitidine hcl</i>	75MG	TABS	OTC-Covered w/Rx
Prostaglandins	<i>misoprostol</i>	200MCG, 100MCG	TABS	
Protectants	CARAFATE	1GM/10ML	SUSP	
	<i>sucralfate</i>	1GM	TABS	
Proton-pump Inhibitors	<i>lansoprazole</i>	30MG, 15MG	CPDR	ST; Must fail preferred Omeprazole

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	<i>omeprazole</i>	40MG, 20MG, 10MG	CPDR	
	ZEGERID	40MG/ 1680MG, 20MG/ 1680MG, 40MG/ 1100MG, 20MG/ 1100MG	PACK, CAPS	
Cathartics and Laxatives	<i>docusate calcium</i>	240MG	CAPS	OTC-Covered w/Rx
	<i>docusate sodium</i>	100MG, 250MG, 100MG	TABS, CAPS	OTC-Covered w/Rx
	GOLYTELY PACKET	227.1GM/ 2.82GM/ 6.36GM/ 5.53GM/ 21.5GM	SOLR	QL (1.00 per 31 days)
	GOLYTELY	236GM/ 2.97GM/ 6.74GM/ 5.86GM/ 22.74GM	SOLR	QL (4000.00 per 31 days)
	METAMUCIL	1.7GM, 0.52GM	WAFR, CAPS	OTC-Covered w/Rx
	NULYTELY/FLAVOR PACKS	420GM/ 1.48GM/ 5.72GM/ 11.2GM	SOLR	QL (4000.00 per 31 days)
	<i>peg 3350/electrolytes</i>	240GM/ 2.98GM/ 6.72GM/ 5.84GM/ 22.72GM	SOLR	QL (4000.00 per 31 days)
	<i>polyethylene glycol 3350</i>		POWD	QL (527.00 per 31 days)
	<i>sorbitol</i>	70%	SOLN	OTC-Covered w/Rx
Cholelitholytic Agents	<i>ursodiol</i>	300MG	CAPS	
Digestants	<i>lipase concentrate-hp</i>	600UNIT	CAPS	OTC-Covered w/Rx
	PANCRELIPASE	30000UNIT/ 8000UNIT/ 30000UNIT	TABS	
	ZENPEP	27000UNIT/ 5000UNIT/ 17000UNIT, 55000UNIT/ 10000UNIT/ 34000UNIT, 82000UNIT/ 15000UNIT/ 51000UNIT	CPEP	
GI Drugs, Miscellaneous	CIMZIA	200MG/ML, 200MG	KIT	PA
Prokinetic Agents	<i>metoclopramide hcl</i>	5MG/5ML	SOLN	QL (1500.00 per 31 days)
	<i>metoclopramide hcl</i>	5MG, 10MG	TABS, SOLN	
<b>GOLD COMPOUNDS</b>				
Gold Compounds	RIDAURA	3MG	CAPS	
<b>HEAVY METAL ANTAGONISTS</b>				
Heavy Metal Antagonists	CUPRIMINE	125MG	CAPS	
	<i>deferoxamine mesylate</i>	500MG, 2GM	SOLR	
<b>HORMONES AND SYNTHETIC SUBSTITUTES</b>				
Adrenals	<i>a-methapred</i>	40MG, 125MG	SOLR	
	ASMANEX 120 METERED DOSES	220MCG/INH	AEPB	
	ASMANEX 14 METERED DOSES	220MCG/INH	AEPB	
	ASMANEX 30 METERED DOSES	220MCG/INH, 110MCG/INH	AEPB	
	ASMANEX 60 METERED DOSES	220MCG/INH	AEPB	
	<i>budesonide</i>	0.5MG/2ML, 0.25MG/2ML	SUSP	AL (max: 8y); QL (120.00 per 31 days)
	CELESTONE	0.6MG/5ML	SOLN	
	<i>cortisone acetate</i>	25MG	TABS	
	<i>dexamethasone</i>	6MG, 4MG, 2MG, 1MG, 1.5MG, 0.75MG, 0.5MG, 0.5MG/5ML	TABS, SOLN, ELIX	
	<i>dexamethasone sodium phosphate</i>	4MG/ML, 10MG/ML	SOLN	
	FLOVENT DISKUS	50MCG/BLIST, 250MCG/BLIST, 100MCG/BLIST	AEPB	
	FLOVENT HFA	44MCG/ACT, 220MCG/ACT, 110MCG/ACT	AERO	
	<i>fludrocortisone acetate</i>	0.1MG	TABS	
	<i>hydrocortisone</i>	5MG, 20MG, 10MG	TABS	
	<i>methylprednisolone</i>	8MG, 4MG, 32MG, 16MG	TABS	
	<i>methylprednisolone acetate</i>	80MG/ML, 40MG/ML	SUSP	
	<i>methylprednisolone sodium succinate</i>	40MG, 1GM, 125MG, 1000MG	SOLR	
	<i>prednisolone</i>	15MG/5ML	SOLN	
	<i>prednisolone sodium phosphate</i>	6.7MG/5ML, 5MG/5ML, 15MG/5ML	SOLN	
	<i>prednisone</i>	5MG, 20MG, 2.5MG, 1MG, 10MG, 5MG/5ML	TABS, SOLN	
	PULMICORT	1MG/2ML	SUSP	AL (max: 8y); QL (120.00 per 31 days)
	QVAR	80MCG/ACT, 40MCG/ACT	AERS	
Androgens	ANDROXY	10MG	TABS	
	<i>danazol</i>	50MG, 200MG, 100MG	CAPS	
	METHITEST	10MG	TABS	
	<i>oxandrolone</i>	2.5MG, 10MG	TABS	PA
	TESTIM	1%	GEL	PA
	<i>testosterone cypionate</i>	200MG/ML, 100MG/ML	OIL	
	<i>testosterone enanthate</i>	200MG/ML	OIL	
Alpha-Glucosidase Inhibitors	<i>acarbose</i>	50MG, 25MG, 100MG	TABS	
Antidiabetic Agents, Miscellaneous	JANUMET	50MG/ 500MG, 50MG/ 1000MG	TABS	PA
Biguanides	<i>metformin hcl</i>	850MG, 500MG, 1000MG	TABS	
	<i>metformin hcl er</i>	750MG, 500MG	TB24	
	RIOMET	500MG/5ML	SOLN	QL (900.00 per 31 days)
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors	JANUVIA	50MG, 25MG, 100MG	TABS	PA
Insulins	LEVEMIR	100UNIT/ML	SOLN	QL (60.00 per 31 days)
	LEVEMIR FLEXPEN	100UNIT/ML	SOLN	QL (60.00 per 31 days)
	NOVOLIN 70/30	30%/ 70%	SUSP	QL (60.00 per 31 days);OTC-Covered w/Rx

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Class	Product Name	Strengths	Form	Coverage Detail
	NOVOLIN N	100UNIT/ML	SUSP	QL (60.00 per 31 days);OTC-Covered w/Rx
	NOVOLIN R	100UNIT/ML	SOLN	QL (60.00 per 31 days);OTC-Covered w/Rx
	NOVOLOG	100UNIT/ML	SOLN	QL (60.00 per 31 days)
	NOVOLOG FLEXPEN	100UNIT/ML	SOLN	QL (60.00 per 31 days)
	NOVOLOG MIX 70/30	30%/ 70%	SUSP	QL (60.00 per 31 days)
	NOVOLOG MIX 70/30 PREFILLED FLEXPEN	30%/ 70%	SUSP	QL (60.00 per 31 days)
	NOVOLOG PENFILL	100UNIT/ML	SOLN	QL (60.00 per 31 days)
	Meglitinides	PRANDIMET	2MG/ 500MG, 1MG/ 500MG	TABS
PRANDIN		2MG, 1MG, 0.5MG	TABS	
Sulfonylureas	<i>chlorpropamide</i>	250MG, 100MG	TABS	
	<i>glimepiride</i>	4MG, 2MG, 1MG	TABS	
	<i>glipizide</i>	5MG, 10MG	TABS	
	<i>glipizide er</i>	5MG, 2.5MG, 10MG	TB24	
	<i>glipizide xl</i>	5MG, 2.5MG, 10MG	TB24	
	<i>glyburide</i>	5MG, 2.5MG, 1.25MG	TABS	
	<i>glyburide micronized</i>	6MG, 3MG, 1.5MG	TABS	
	<i>glyburide/metformin hcl</i>	5MG/ 500MG, 2.5MG/ 500MG, 1.25MG/ 250MG	TABS	
Thiazolidinediones	ACTOPLUS MET	15MG/ 850MG, 15MG/ 500MG	TABS	
	ACTOS	45MG, 30MG, 15MG	TABS	
	AVANDAMET	4MG/ 500MG, 2MG/ 500MG, 4MG/ 1000MG, 2MG/ 1000MG	TABS	
	AVANDARYL	8MG/4MG, 4MG/ 4MG, 8MG/ 2MG, 4MG/ 2MG, 4MG/ 1MG	TABS	
	AVANDIA	8MG, 4MG, 2MG	TABS	
	Glycogenolytic Agents	GLUCAGEN	1MG	SOLR
GLUCAGEN HYPOKIT		1MG	SOLR	QL (2.00 per 31 days)
GLUCAGON EMERGENCY KIT		1MG	KIT	QL (2.00 per 31 days)
Contraceptives	<i>apri</i>	0.15MG/ 30MCG	TABS	
	<i>aviane</i>	20MCG/ 0.1MG	TABS	
	<i>balziva</i>	35MCG/ 0.4MG	TABS	
	<i>camila</i>	0.35MG	TABS	
	<i>cryselle-28</i>	30MCG/ 0.3MG	TABS	
	<i>enpresse-28</i>		TABS	
	<i>errin</i>	0.35MG	TABS	
	<i>jolivette</i>	0.35MG	TABS	
	<i>junel 1.5/30</i>	30MCG/ 1.5MG	TABS	
	<i>junel 1/20</i>	20MCG/ 1MG	TABS	
	<i>junel fe 1.5/30</i>	30MCG/ 75MG/ 1.5MG	TABS	
	<i>junel fe 1/20</i>	20MCG/ 75MG/ 1MG	TABS	
	<i>kariva</i>		TABS	
	<i>kelnor 1/35</i>	35MCG/ 1MG	TABS	
	<i>lessina-28</i>	20MCG/ 0.1MG	TABS	
	<i>levora 0.15/30-28</i>	30MCG/ 0.15MG	TABS	
	<i>low-ogestrel</i>	30MCG/ 0.3MG	TABS	
	<i>lutera</i>	20MCG/ 0.1MG	TABS	
	<i>microgestin 1.5/30</i>	30MCG/ 1.5MG	TABS	
	<i>microgestin 1/20</i>	20MCG/ 1MG	TABS	
	<i>microgestin fe</i>	20MCG/ 75MG/ 1MG	TABS	
	<i>microgestin fe 1.5/30</i>	30MCG/ 75MG/ 1.5MG	TABS	
	MIRENA	20MCG/24HR	IUD	
	<i>mononessa</i>	35MCG/ 0.25MG	TABS	
	<i>necon 0.5/35-28</i>	35MCG/ 0.5MG	TABS	
	<i>necon 1/35-28</i>	35MCG/ 1MG	TABS	
	<i>necon 1/50-28</i>	50MCG/ 1MG	TABS	
	<i>necon 7/7/7</i>		TABS	
	<i>next choice</i>	0.75MG	TABS	QL (4.00 per 31 days)
	<i>nora-be</i>	0.35MG	TABS	
	<i>nortrel 0.5/35 (28)</i>	35MCG/ 0.5MG	TABS	
	<i>nortrel 1/35 (21)</i>	35MCG/ 1MG	TABS	
	<i>nortrel 1/35 (28)</i>	35MCG/ 1MG	TABS	
	<i>nortrel 7/7/7</i>		TABS	
	NUVARING	0.015MG/24HR/ 0.12MG/24HR	RING	
	<i>ocella</i>	3MG/ 0.03MG	TABS	
	ORTHO EVRA	20MCG/24HR/ 150MCG/24HR	PTWK	
	<i>portia-28</i>	0.03MG/ 0.15MG	TABS	
	<i>previfem</i>	35MCG/ 0.25MG	TABS	
	<i>quasense</i>	0.03MG/ 0.15MG	TABS	QL (91.00 per 91 days)
	<i>reclipsen</i>	0.15MG/ 30MCG	TABS	
	<i>solia</i>	0.15MG/ 30MCG	TABS	
	<i>sprintec 28</i>	35MCG/ 0.25MG	TABS	
<i>sronyx</i>	20MCG/ 0.1MG	TABS		
<i>trinessa</i>		TABS		

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Class	Product Name	Strengths	Form	Coverage Detail	
	<i>tri-previfem</i>		TABS		
	<i>tri-sprintec</i>		TABS		
	<i>trivora-28</i>		TABS		
	<i>velivet</i>		TABS		
	<i>zovia 1/35e</i>	35MCG/ 1MG	TABS		
	<i>zovia 1/50e</i>	50MCG/ 1MG	TABS		
Estrogen Agonist-Antagonists	EVISTA	60MG	TABS		
Estrogens	CENESTIN	1.25MG, 0.9MG, 0.625MG, 0.45MG, 0.3MG	TABS		
	ENJUVIA	1.25MG, 0.9MG, 0.625MG, 0.45MG, 0.3MG	TABS		
	<i>estradiol</i>	2MG, 1MG, 0.5MG, 37.5MCG/24HR, 0.1MG/24HR, 0.075MG/24HR, 0.06MG/24HR, 0.05MG/24HR, 0.025MG/24HR	TABS, PTWK		
	<i>estropiate</i>	3MG, 1.5MG, 0.75MG	TABS		
	MENEST	2.5MG, 1.25MG, 0.625MG, 0.3MG	TABS		
	PREMARIN	1.25MG, 0.9MG, 0.625MG, 0.45MG, 0.3MG, 25MG	TABS, SOLR		
	PREMARIN W/APPLICATOR	0.625MG/GM	CREA		
	PREMPHASE	0.625MG/ 5MG	TABS		
	PREMPRO	0.625MG/ 5MG, 0.625MG/ 2.5MG, 0.45MG/ 1.5MG, 0.3MG/ 1.5MG	TABS		
	Parathyroid	<i>calcitonin-salmon</i>	200UNIT/ACT	SOLN	
Pituitary	<i>desmopressin acetate</i>	0.2MG, 0.1MG, 0.01%	TABS, SOLN		
Progestins	ENDOMETRIN	100MG	INST		
	FIRST-PROGESTERONE VGS 100 COMPOUNDING KIT	100MG	SUPP		
	FIRST-PROGESTERONE VGS 200 COMPOUNDING KIT	200MG	SUPP		
	FIRST-PROGESTERONE VGS 25 COMPOUNDING KIT	25MG	SUPP		
	FIRST-PROGESTERONE VGS 400 COMPOUNDING KIT	400MG	SUPP		
	FIRST-PROGESTERONE VGS 50 COMPOUNDING KIT	50MG	SUPP		
	<i>medroxyprogesterone acetate</i>	150MG/ML	SUSP	QL (1.00 per 93 days)	
	<i>medroxyprogesterone acetate</i>	5MG, 2.5MG, 10MG	TABS		
	<i>norethindrone acetate</i>	5MG	TABS		
	Somatotropin Agonists	TEV-TROPIN	5MG	SOLR	PA
Antithyroid Agents	<i>methimazole</i>	5MG, 10MG	TABS		
	<i>propylthiouracil</i>	50MG	TABS	QL (558.00 per 31 days)	
	SSKI	1GM/ML	SOLN		
Thyroid Agents	ARMOUR THYROID	90MG, 60MG, 30MG, 300MG, 240MG, 180MG, 15MG, 120MG	TABS		
	<i>levothroid</i>	88MCG, 75MCG, 50MCG, 300MCG, 25MCG, 200MCG, 175MCG, 150MCG, 137MCG, 125MCG, 112MCG, 100MCG	TABS		
	<i>levothyroxine sodium</i>	88MCG, 75MCG, 50MCG, 300MCG, 25MCG, 200MCG, 175MCG, 150MCG, 137MCG, 125MCG, 112MCG, 100MCG, 500MCG, 200MCG	TABS, SOLR		
	<i>levoxyl</i>	88MCG, 75MCG, 50MCG, 25MCG, 200MCG, 175MCG, 150MCG, 137MCG, 125MCG, 112MCG, 100MCG	TABS		
	<i>liothyronine sodium</i>	5MCG, 50MCG, 25MCG	TABS		
	NATURE-THROID	65MG, 32.5MG, 195MG, 16.25MG, 130MG	TABS		
	<i>thyroid</i>	65MG, 32.5MG, 195MG, 130MG	TABS		
	THYROLAR-1	60MG	TABS		
	THYROLAR-1/2	30MG	TABS		
	THYROLAR-1/4	15MG	TABS		
	THYROLAR-2	120MG	TABS		
	THYROLAR-3	180MG	TABS		
	<i>unithroid</i>	88MCG, 75MCG, 50MCG, 300MCG, 25MCG, 200MCG, 175MCG, 150MCG, 125MCG, 112MCG, 100MCG	TABS		
	<i>unithroid direct</i>	150MCG	TABS		
	WESTHROID	65MG, 32.5MG, 130MG	TABS		
	<b>LOCAL ANESTHETICS</b>				
	Local Anesthetics	<i>lidocaine hcl</i>	2%, 1.5%, 1%, 0.5%	SOLN	
	<b>MISCELLANEOUS THERAPEUTIC AGENTS</b>				

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Class	Product Name	Strengths	Form	Coverage Detail
5-alpha-Reductase Inhibitors	AVODART	0.5MG	CAPS	
	<i>finasteride</i>	5MG	TABS	
Alcohol Deterrents	ANTABUSE	500MG, 250MG	TABS	
Antidotes	<i>acetylcysteine</i>	20%, 10%	SOLN	
	<i>leucovorin calcium</i>	5MG, 25MG, 350MG, 200MG, 100MG, 10MG/ML	TABS, SOLR, SOLN	
Antigout Agents	<i>allopurinol</i>	300MG, 100MG	TABS	
	<i>allopurinol sodium</i>	500MG	SOLR	
	<i>colchicine</i>	0.6MG	TABS	
Biologic Response Modifiers	COPAXONE	20MG/ML	KIT	PA
	EXTAVIA	0.3MG	SOLR	PA
	REBIF	44MCG/0.5ML, 22MCG/0.5ML	SOLN	PA
	REBIF TITRATION PACK		SOLN	PA
	THALOMID	50MG, 200MG, 150MG, 100MG	CAPS	PA
Bone Resorption Inhibitors	<i>alendronate sodium</i>	70MG, 5MG, 40MG, 35MG, 10MG	TABS	
Cariostatic Agents	<i>cavarest</i>	1.1%	GEL	
	<i>dentagel</i>	1.1%	GEL	
	<i>fluoridex daily defense</i>	1.1%	GEL	
	<i>karigel</i>	1.1%	GEL	
	<i>karigel-n</i>	1.1%	GEL	
	<i>neutragard advanced</i>	1.1%	GEL	
	<i>phos-flur</i>	1.1%	GEL	
	<i>sf</i>	1.1%	GEL	
		0.5MG/ML, 0.125MG/DROP, 2.2MG, 1MG, 0.5MG, 0.25MG	SOLN, CHEW	
		<i>sodium fluoride</i>		
Disease-modifying Antirheumatic Agents	HUMIRA	40MG/0.8ML, 20MG/0.4ML	KIT	PA
	HUMIRA PEN	40MG/0.8ML	KIT	PA
	HUMIRA PEN-CROHNS DISEASE STARTER	40MG/0.8ML	KIT	PA
	<i>leflunomide</i>	20MG, 10MG	TABS	
Immunosuppressive Agents	<i>azathioprine</i>	50MG	TABS	
	<i>azathioprine sodium</i>	100MG	SOLR	
	CELLCEPT	200MG/ML	SUSR	
	CELLCEPT INTRAVENOUS	500MG	SOLR	
	<i>cyclosporine</i>	50MG/ML, 100MG/ML, 25MG, 100MG	SOLN, CAPS	
	<i>cyclosporine modified</i>	100MG/ML, 50MG, 25MG, 100MG	SOLN, CAPS	
	<i>mycophenolate mofetil</i>	500MG, 250MG	TABS, CAPS	
	PROGRAF	5MG/ML	SOLN	
	<i>tacrolimus</i>	5MG, 1MG, 0.5MG	CAPS	
Other Miscellaneous Therapeutic Agents	CALAFOL RX	600MG/ 400UNIT/ 1.6MG/ 425MCG/ 5MG/ 25MG	TABS	
	<i>levocarnitine</i>	330MG, 200MG/ML, 1GM/10ML	TABS, SOLN	
	SUPARTZ	25MG/2.5ML	SOLN	PA
<b>OXYTICS</b>				
Oxytocs	ERGOTRATE MALEATE	0.2MG, 0.2MG/ML	TABS, SOLN	
	METHERGINE	0.2MG, 0.2MG/ML	TABS, SOLN	
<b>RESPIRATORY TRACT AGENTS</b>				
Leukotriene Modifiers	SINGULAIR	10MG, 4MG, 5MG	TABS, PACK, CHEW	PA; ST
Mast-cell Stabilizers	<i>cromolyn sodium</i>	20MG/2ML	NEBU	
Antitussives	<i>benzonatate</i>	200MG, 100MG	CAPS	AL (max: 20y)
	<i>betavent</i>	20MG/5ML/ 100MG/5ML	LIQD	AL (max: 20y)
	<i>biotuss pediatric</i>	5MG/ML/ 50MG/ML/ 2.5MG/ML	LIQD	AL (max: 20y)
	<i>bromaline dm</i>	1MG/5ML/ 5MG/5ML/ 15MG/5ML	ELIX	AL (max: 20y);OTC-Covered w/Rx
	<i>bromfed dm</i>	2MG/5ML/ 10MG/5ML/ 30MG/5ML	SYRP	AL (max: 20y)
	<i>bromphenex dm</i>	4MG/5ML/ 30MG/5ML/ 60MG/5ML	SYRP	AL (max: 20y);OTC-Covered w/Rx
	<i>broncotron</i>	10MG/5ML/ 100MG/5ML	LIQD	AL (max: 20y);OTC-Covered w/Rx
	<i>brotapp dm</i>	1MG/5ML/ 5MG/5ML/ 15MG/5ML	LIQD	AL (max: 20y);OTC-Covered w/Rx
	<i>cheratussin ac</i>	10MG/5ML/ 100MG/5ML	SYRP	AL (max: 20y)
	<i>cheratussin dac</i>	10MG/5ML/ 100MG/5ML/ 30MG/5ML	SOLN	AL (max: 20y)
	<i>codeine phosphate/guaifenesin</i>	10MG/5ML/ 300MG/5ML	LIQD	AL (max: 20y)
	<i>coldec dm</i>	4MG/5ML/ 15MG/5ML/ 45MG/5ML	SYRP	AL (max: 20y)
		4MG/5ML/ 15MG/5ML/ 12.5MG/5ML, 1MG/ML/ 3MG/ML/ 3.5MG/ML	SYRP, LIQD	AL (max: 20y)
	<i>c-phen dm</i>			
	<i>decon dm</i>	2MG/5ML/ 10MG/5ML/ 30MG/5ML	SYRP	AL (max: 20y)
	DELSYM	30MG/5ML	LQCR	AL (max: 20y);OTC-Covered w/Rx
	<i>dex pc</i>	2MG/5ML/ 15MG/5ML/ 6MG/5ML	SYRP	AL (max: 20y)
	<i>dexatrex d nasal</i>	10MG/5ML/ 20MG/5ML	ELIX	AL (max: 20y);OTC-Covered w/Rx
	<i>dex-tuss</i>	10MG/5ML/ 300MG/5ML	LIQD	AL (max: 20y)
	<i>ed-a-hist dm</i>	4MG/5ML/ 15MG/5ML/ 10MG/5ML	LIQD	AL (max: 20y)
	<i>execlear-dm</i>	15MG/5ML/ 150MG/5ML/ 30MG/5ML	SYRP	AL (max: 20y)

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Class	Product Name	Strengths	Form	Coverage Detail
	<i>expectuss</i>	20MG/5ML/ 75MG/5ML	LIQD	AL (max: 20y)
	<i>gani-tuss nr</i>	10MG/5ML/ 100MG/5ML	LIQD	AL (max: 20y)
	<i>genebrom dm</i>	2MG/5ML/ 10MG/5ML/ 30MG/5ML	SYRP	AL (max: 20y)
	<i>genedotuss-dm</i>	20MG/5ML/ 200MG/5ML	LIQD	AL (max: 20y)
	<i>giltuss tr</i>	14MG/ 288MG/ 7MG	CAPS	AL (max: 20y)
	<i>guaifenesin /dextromethorphan</i>	10MG/5ML/ 100MG/5ML	SYRP	AL (max: 20y);OTC-Covered w/Rx
	<i>guaifenesin/codeine</i>	10MG/ 300MG	TABS	AL (max: 20y)
	<i>guaifenesin/codeine phosphate</i>	10MG/5ML/ 100MG/5ML	SOLN	AL (max: 20y)
	<i>guaifenesin-dm nr</i>	10MG/5ML/ 100MG/5ML	LIQD	AL (max: 20y);OTC-Covered w/Rx
	<i>hydrocodone /homatropine</i>	1.5MG/5ML/ 5MG/5ML	SYRP	AL (max: 20y)
	<i>hydromet</i>	1.5MG/5ML/ 5MG/5ML	SYRP	AL (max: 20y)
	<i>iophen c-nr</i>	10MG/5ML/ 100MG/5ML	LIQD	AL (max: 20y)
	<i>iophen dm-nr</i>	10MG/5ML/ 100MG/5ML	LIQD	AL (max: 20y)
	<i>mintuss dr</i>	2MG/5ML/ 15MG/5ML/ 6MG/5ML	SYRP	AL (max: 20y)
	<i>mucusrelief dm</i>	20MG/ 400MG	TABS	AL (max: 20y);OTC-Covered w/Rx
	<i>mytussin ac</i>	10MG/5ML/ 100MG/5ML	SYRP	AL (max: 20y)
	<i>mytussin dac</i>	10MG/5ML/ 100MG/5ML/ 30MG/5ML	SOLN	AL (max: 20y)
	<i>neotuss</i>	30MG/5ML/ 200MG/5ML	LIQD	AL (max: 20y);OTC-Covered w/Rx
	<i>nortuss-ex</i>	20MG/5ML/ 200MG/5ML	LIQD	AL (max: 20y)
	<i>novagest expectorant/codeine</i>	10MG/5ML/ 100MG/5ML/ 30MG/5ML	SOLN	AL (max: 20y)
	<i>pediahist dm</i>	1MG/ML/ 4MG/ML/ 15MG/ML	LIQD	AL (max: 20y)
	<i>pe-hist dm</i>	2MG/5ML/ 15MG/5ML/ 5MG/5ML	SYRP	AL (max: 20y)
	<i>promethazine /codeine</i>	10MG/5ML/ 6.25MG/5ML	SYRP	AL (max: 20y)
	<i>promethazine /dextromethorphan</i>	15MG/5ML/ 6.25MG/5ML	SYRP	AL (max: 20y)
	<i>promethazine vc/codeine</i>	10MG/5ML/ 5MG/5ML/ 6.25MG/5ML	SYRP	AL (max: 20y)
	<i>promethazine-dm</i>	15MG/5ML/ 6.25MG/5ML	SYRP	AL (max: 20y)
	<i>pse brom dm</i>	4MG/5ML/ 30MG/5ML/ 60MG/5ML	SYRP	AL (max: 20y)
	<i>pulexn dm</i>	10MG/5ML/ 100MG/5ML	SYRP	AL (max: 20y)
	<i>pulmari-gp</i>	20MG/5ML/ 100MG/5ML	LIQD	AL (max: 20y)
	<i>q-tapp dm</i>	1MG/5ML/ 5MG/5ML/ 15MG/5ML	ELIX	AL (max: 20y);OTC-Covered w/Rx
	<i>q-tussin dm</i>	10MG/5ML/ 100MG/5ML	SYRP	AL (max: 20y);OTC-Covered w/Rx
	<i>reme tussin dm</i>	2MG/5ML/ 15MG/5ML/ 5MG/5ML	SYRP	AL (max: 20y)
	<i>robafen ac</i>	10MG/5ML/ 100MG/5ML	SYRP	AL (max: 20y)
	<i>robafen dm</i>	10MG/5ML/ 100MG/5ML	SYRP	AL (max: 20y);OTC-Covered w/Rx
	<i>robafen dm clear</i>	10MG/5ML/ 100MG/5ML	SYRP	AL (max: 20y);OTC-Covered w/Rx
	<i>romilar ac</i>	10MG/5ML/ 100MG/5ML	SOLN	AL (max: 20y)
	<i>sildec dm</i>	4MG/5ML/ 15MG/5ML/ 45MG/5ML	SYRP	AL (max: 20y)
	<i>sildec pe-dm</i>	4MG/5ML/ 15MG/5ML/ 12.5MG/5ML	SYRP	AL (max: 20y)
	<i>trital dm</i>	4MG/5ML/ 15MG/5ML/ 10MG/5ML	LIQD	AL (max: 20y)
	TUSSIGON	1.5MG/ 5MG	TABS	AL (max: 20y)
	<i>tustan 12s</i>	30MG/5ML/ 4MG/5ML	SUSP	AL (max: 20y)
Expectorants	<i>altarusin-pe</i>	100MG/5ML/ 30MG/5ML	SYRP	AL (max: 20y);OTC-Covered w/Rx
	<i>bidex</i>	400MG	TABS	OTC-Covered w/Rx
	<i>crantex</i>	100MG/5ML/ 7.5MG/5ML	SYRP	AL (max: 20y)
	<i>despec</i>	100MG/5ML/ 5MG/5ML	LIQD	AL (max: 20y);OTC-Covered w/Rx
	<i>fenesin ir</i>	400MG	TABS	OTC-Covered w/Rx
	<i>gg 200 nr</i>	200MG	TABS	OTC-Covered w/Rx
	<i>guaifenesin</i>	100MG/5ML	SYRP	AL (max: 20y);OTC-Covered w/Rx
	<i>guaifenesin</i>	400MG	TABS	OTC-Covered w/Rx
	<i>guaifenesin</i>	200MG	TABS	
	<i>guaifenesin /phenylephrine</i>	100MG/5ML/ 7.5MG/5ML	LIQD	AL (max: 20y)
	<i>liquibid</i>	400MG	TABS	OTC-Covered w/Rx
	<i>mucus relief</i>	400MG	TABS	OTC-Covered w/Rx
	<i>organ-i nr</i>	200MG	TABS	
	<i>phenydex pediatric</i>	50MG/ML/ 5MG/ML	LIQD	AL (max: 20y)
	<i>pseudoephedrine/guaifenesin</i>	200MG/5ML/ 40MG/5ML	SYRP	AL (max: 20y)
	<i>refenesen</i>	200MG	TABS	OTC-Covered w/Rx
	<i>refenesen 400</i>	400MG	TABS	OTC-Covered w/Rx
	<i>xpect</i>	400MG	TABS	OTC-Covered w/Rx
Mucolytic Agents	<i>broncho saline</i>	0.9%	AERS	OTC-Covered w/Rx
	<i>sodium chloride</i>	0.9%	NEBU	OTC-Covered w/Rx
Respiratory Tract Agents, Miscellaneous	XOLAIR	150MG	SOLR	PA
<b>SKIN AND MUCOUS MEMBRANE PREPARATIONS</b>				
Antibacterials	<i>bacitracin</i>	500UNIT/GM	OINT	OTC-Covered w/Rx
	<i>bacitracin zinc</i>	500UNIT/GM	OINT	OTC-Covered w/Rx
	<i>bacitracin/polymyxin</i>	500UNIT/GM/ 10000UNIT/GM	OINT	OTC-Covered w/Rx
	<i>clindamycin phosphate</i>	1%, 2%	SOLN, LOTN, GEL , CREA	
	<i>ery</i>	2%	PADS	
	<i>erythromycin</i>	2%	SOLN, GEL	
	<i>erythromycin/benzoyl peroxide</i>	5%/ 3%	GEL	
	<i>gentamicin sulfate</i>	0.1%	OINT, CREA	
	<i>metronidazole</i>	0.75%	CREA	
	<i>metronidazole vaginal</i>	0.75%	GEL	
	<i>mupirocin</i>	2%	OINT	

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Class	Product Name	Strengths	Form	Coverage Detail
	<i>sulfacetamide sodium</i>	10%	SUSP	
	<i>vandazole</i>	0.75%	GEL	
Azoles	<i>clotrimazole</i>	1%	CREA, SOLN	OTC-Covered w/Rx
	<i>clotrimazole</i>	10MG, 1%	TROC, SOLN, LOZG, CREA	
	<i>clotrimazole 3 day</i>	2%	CREA	OTC-Covered w/Rx
	<i>clotrimazole anti-fungal</i>	1%	CREA	OTC-Covered w/Rx
	<i>clotrimazole/betamethasone dipropionate</i>	0.05%/ 1%	LOTN, CREA	
	<i>econazole nitrate</i>	1%	CREA	
	GYNE-LOTRIMIN	100MG, 1%	TABS, CREA	OTC-Covered w/Rx
	GYNE-LOTRIMIN 3	2%	CREA	OTC-Covered w/Rx
	<i>ketoconazole</i>	2%	SHAM, CREA	
	<i>kuric</i>	2%	CREA	
	LOTRIMIN AF	1%	CREA	OTC-Covered w/Rx
	<i>miconazole</i>	2%	CREA	OTC-Covered w/Rx
	MICONAZOLE 3	200MG	SUPP	
	<i>miconazole 3 combo pack</i>		KIT	OTC-Covered w/Rx
	<i>miconazole 7</i>	100MG, 2%	SUPP, CREA	OTC-Covered w/Rx
	<i>miconazole nitrate</i>	100MG, 2%	SUPP, CREA	OTC-Covered w/Rx
	MONISTAT 1 COMBO PACK		KIT	OTC-Covered w/Rx
	MONISTAT 3	4%, 200MG/5GM	CREA	OTC-Covered w/Rx
	MONISTAT 3 COMBINATION PACK		KIT	OTC-Covered w/Rx
	MONISTAT 7	100MG, 2%	SUPP, CREA	OTC-Covered w/Rx
	MONISTAT 7 COMBINATION PACK		KIT	OTC-Covered w/Rx
	<i>terconazole</i>	80MG, 0.8%, 0.4%	SUPP, CREA	
Hydroxypyridones	<i>ciclopirox</i>	0.77%	SUSP, GEL	
	<i>ciclopirox nail lacquer</i>	8%	SOLN	
	<i>ciclopirox olamine</i>	0.77%	CREA	
Polyenes	<i>nystatin</i>	100000UNIT/GM	POWD, OINT, CREA	
	NYSTATIN VAGINAL	100000UNIT	TABS	
Local Anti-infectives, Miscellaneous	<i>benzoyl peroxide</i>	10%, 5%	GEL, LOTN	OTC-Covered w/Rx
	<i>benzoyl peroxide</i>	10%, 5%	GEL	
	<i>benzoyl peroxide 10</i>	10%	LIQD, GEL	
	<i>benzoyl peroxide 5</i>	5%	LIQD, GEL	
	<i>benzoyl peroxide cleanser</i>	8.5%/ 10%, 6.5%/ 10%, 4.5%/ 10%	LIQD	
	<i>benzoyl peroxide creamy wash</i>	8%, 4%	LIQD	
	<i>operand chlorhexidine gluconate</i>	4%	LIQD	QL (480.00 per 31 days);OTC-Covered w/Rx
	<i>selenium sulfide</i>	2.5%	LOTN	
	<i>silver sulfadiazine</i>	1%	CREA	QL (400.00 per 31 days)
	<i>ssd</i>	1%	CREA	QL (400.00 per 31 days)
	<i>ssd af</i>	1%	CREA	QL (400.00 per 31 days)
Scabicides and Pediculicides	<i>acticin</i>	5%	CREA	QL (60.00 per 31 days)
	EURAX	10%	LOTN, CREA	
	OVIDE	0.5%	LOTN	QL (59.00 per 31 days)
	<i>permethrin</i>	5%	CREA	QL (60.00 per 31 days)
	<i>permethrin</i>	1%	LOTN	QL (60.00 per 31 days);OTC-Covered w/Rx
Anti-inflammatory Agents	<i>alclometasone dipropionate</i>	0.05%	OINT, CREA	
	<i>amcinonide</i>	0.1%	LOTN, CREA	
	<i>augmented betamethasone dipropionate</i>	0.05%	CREA	
	<i>betamethasone dipropionate</i>	0.05%	OINT, LOTN, CREA	
	<i>betamethasone valerate</i>	0.1%	OINT, LOTN, CREA	
	<i>clobetasol propionate</i>	0.05%	OINT, GEL, CREA	
	<i>clobetasol propionate e</i>	0.05%	CREA	
	<i>clobetasol propionate emollient</i>	0.05%	CREA	
	CORTISPORIN	400UNIT/GM/ 1%/ 0.5%/ 5000UNIT/GM	OINT	
	DERMA-SMOOTHIE/FS BODY OIL	0.01%	OIL	
	DERMA-SMOOTHIE/FS SCALP OIL	0.01%	OIL	
	<i>desonide</i>	0.05%	OINT, LOTN, CREA	
	<i>desoximetasone</i>	0.05%	CREA	
	<i>difflorasone diacetate</i>	0.05%	OINT, CREA	
	<i>fluocinolone acetonide</i>	0.01%, 0.025%	SOLN, OINT, CREA	
	<i>fluocinonide</i>	0.05%	SOLN, OINT, GEL, CREA	
	<i>fluocinonide emollient base</i>	0.05%	CREA	
	<i>fluocinonide-e</i>	0.05%	CREA	
	<i>fluticasone propionate</i>	0.005%, 0.05%	OINT, CREA	
	<i>hydrocortisone</i>	1%	OINT, LOTN, CREA	OTC-Covered w/Rx
	<i>hydrocortisone</i>	2.5%, 1%	OINT, LOTN, CREA	
	<i>hydrocortisone</i>	100MG/60ML	ENEM	

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Class	Product Name	Strengths	Form	Coverage Detail
	<i>hydrocortisone maximum strength</i>	1%	CREA	OTC-Covered w/Rx
	<i>hydrocortisone maximum strength plus 12 moisturizers</i>	1%	CREA	OTC-Covered w/Rx
	<i>hydrocortisone valerate</i>	0.2%	OINT, CREA	
	<i>mometasone furoate</i>	0.1%	OINT, CREA	
	<i>nystatin/triamcinolone</i>	100000UNIT/GM/ 0.1%	OINT, CREA	
	<i>proctocream-hc</i>	2.5%	CREA	
	<i>proctosol hc</i>	2.5%	CREA	
	<i>proctozone-hc</i>	2.5%	CREA	
	<i>triamcinolone acetonide</i>	0.1%, 0.025%, 0.5%	OINT, CREA	
	<i>triamcinolone in orabase</i>	0.1%	PSTE	
Antipruritics and Local Anesthetics	<i>lidocaine</i>	5%, 3%	OINT, LOTN, CREA	
	<i>lidocaine hcl</i>	4%, 2%	SOLN, GEL	
	<i>lidocaine hcl jelly</i>	2%	GEL	
	<i>lidocaine/prilocaine</i>	2.5%/ 2.5%	KIT, CREA	
	<i>phenazopyridine hcl</i>	200MG, 100MG	TABS	
	<i>pramoxine hcl</i>	1%	FOAM	OTC-Covered w/Rx
	PROCTOFOAM HC	1%/ 1%	FOAM	
	<i>prudoxin</i>	5%	CREA	QL (45.00 per 31 days)
Astringents	ALUMINUM ACETATE		SOLN	OTC-Covered w/Rx
Cell Stimulants and Proliferants	<i>avita</i>	0.025%	GEL, CREA	AL (max: 20y); QL (45.00 per 31 days)
	<i>tretinoin</i>	0.025%, 0.01%, 0.1%, 0.05%	GEL, CREA	AL (max: 20y); QL (45.00 per 31 days)
Basic Lotions and Liniments	<i>amlactin</i>	12%	LOTN	OTC-Covered w/Rx
	<i>ammonium lactate</i>	12%	LOTN, CREA	OTC-Covered w/Rx
	<i>ammonium lactate</i>	12%	LOTN, CREA	
Keratolytic Agents	<i>clear away</i>	17%	LIQD	OTC-Covered w/Rx
	CLEAR AWAY ONE STEP WART REMOVER	40%	PADS	OTC-Covered w/Rx
	CLEAR AWAY PLANTAR SYSTEM	40%	PADS	OTC-Covered w/Rx
	CLEAR AWAY WART REMOVER SYSTEM	40%	PADS	OTC-Covered w/Rx
	COMPOUND W	17%	LIQD	OTC-Covered w/Rx
	COMPOUND W MAXIMUM STRENGTH	17%	GEL	OTC-Covered w/Rx
	<i>compound w one step plantar pads</i>	40%	PADS	OTC-Covered w/Rx
	CORN REMOVER ONE STEP	40%	PADS	OTC-Covered w/Rx
	CORN REMOVER ULTRA THIN	40%	PADS	OTC-Covered w/Rx
	CORN REMOVER WATERPROOF	40%	PADS	OTC-Covered w/Rx
	<i>duofilm</i>	17%	SOLN	OTC-Covered w/Rx
	FREEZONE	17.6%	LIQD	OTC-Covered w/Rx
	<i>freezezone callus remover</i>	40%	PADS	OTC-Covered w/Rx
	<i>freezezone corn remover</i>	40%	PADS	OTC-Covered w/Rx
	<i>occlusal-hp</i>	17%	LIQD	OTC-Covered w/Rx
	<i>one step callus remover</i>	40%	PADS	OTC-Covered w/Rx
	<i>salactic film</i>	17%	SOLN	OTC-Covered w/Rx
	<i>sal-plant</i>	17%	GEL	OTC-Covered w/Rx
	<i>scholls corn removers</i>	40%	PADS	OTC-Covered w/Rx
	<i>sodium sulfacetamide-sulfur wash</i>			
	<i>w/meratan</i>	5%/ 10%/ 4%/ 5%/ 10%	KIT	OTC-Covered w/Rx
	<i>urea</i>	50%, 40%	CREA	
	WART OFF	17%	SOLN	OTC-Covered w/Rx
Skin and Mucous Membrane Agents, Misc	<i>amnestem</i>	40MG, 20MG, 10MG	CAPS	AL (min: 12y, max: 20y); QL (62.00 per 31 days); ST; Must fail preferred topical antibiotic; Max duration of therapy 20 weeks
	<i>calcipotriene</i>	0.005%	SOLN	
	<i>capsaicin</i>	0.025%	CREA	OTC-Covered w/Rx
	<i>claravis</i>	40MG, 30MG, 20MG, 10MG	CAPS	AL (min: 12y, max: 20y); QL (62.00 per 31 days); ST; Must fail preferred topical antibiotic; Max duration of therapy 20 weeks
	CONDYLOX	0.5%	GEL	PA
	DOVONEX	0.005%	CREA	
	DRITHO-CREME HP	1%	CREA	
	ELIDEL	1%	CREA	QL (30.00 per 31 days); ST; Must fail preferred topical corticosteroid
	<i>fluorouracil</i>	5%, 2%	SOLN, CREA	PA
	<i>podofilox</i>	0.5%	SOLN	
	SANTYL	250UNIT/GM	OINT	PA
	<i>sotret</i>	40MG, 30MG, 20MG, 10MG	CAPS	AL (min: 12y, max: 20y); QL (62.00 per 31 days); ST; Must fail preferred topical antibiotic; Max duration of therapy 20 weeks
	TAZORAC	0.1%, 0.05%	GEL, CREA	AL (max: 20y); QL (30.00 per 31 days)

# WellCare Health Plan Florida Medicaid Preferred Drug List

Class	Product Name	Strengths	Form	Coverage Detail
	VOLTAREN	1%	GEL	
<b>SMOOTH MUSCLE RELAXANTS</b>				
Genitourinary Smooth Muscle Relaxants	<i>oxybutynin chloride</i>	5MG, 5MG/5ML	TABS, SYRP	
	<i>oxybutynin chloride er</i>	5MG, 15MG, 10MG	TB24	
	VESICARE	5MG, 10MG	TABS	
Respiratory Smooth Muscle Relaxants	<i>aminophylline</i>	200MG, 100MG, 25MG/ML	TABS, SOLN	
	<i>theophylline cr</i>	300MG, 200MG, 100MG	TB12	
	<i>theophylline er</i>	600MG, 400MG, 450MG, 300MG, 200MG, 100MG	TB24, TB12	
	<i>theophylline td</i>	300MG, 200MG, 100MG	TB12	
<b>VACCINES</b>				
Vaccines	CERVARIX		SUSP	PA
	GARDASIL		SUSP	PA
<b>VITAMINS</b>				
Multivitamin Preparations	<i>elite-ob</i>	120MG/ 2100UNIT/ 315UNIT/ 1MG/ 15MCG/ 20UNIT/ 1.25MG/ 50MG/ 15MG/ 10MG/ 10MG/ 3.4MG/ 2MG/ 10MG	TABS	
	<i>folbecal</i>	200MG/ 12MCG/ 1MG/ 75MG	TABS	
	<i>multi-vit /fluoride</i>	35MG/ML/ 400UNIT/ML/ 2MCG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 0.5MG/ML/ 5UNIT/ML/ 1500UNIT/ML, 35MG/ML/ 400UNIT/ML/ 2MCG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.25MG/ML/ 0.5MG/ML/ 5UNIT/ML/ 1500UNIT/ML	SOLN	AL (max: 12y)
	<i>multi-vit /iron /fluoride</i>	35MG/ML/ 400UNIT/ML/ 10MG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.25MG/ML/ 0.5MG/ML/ 5UNIT/ML/ 1500UNIT/ML	SOLN	AL (max: 12y)
	<i>multi-vitamin /fluoride</i>	60MG/ 400UNIT/ 4.5MCG/ 0.3MG/ 13.5MG/ 1.05MG/ 1.2MG/ 1MG/ 1.05MG/ 2500UNIT/ 15MG, 60MG/ 400UNIT/ 4.5MCG/ 0.3MG/ 13.5MG/ 1.05MG/ 1.2MG/ 0.5MG/ 1.05MG/ 2500UNIT/ 15MG	CHEW	
	<i>multi-vitamin drops</i>	35MG/ML/ 2MCG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 1500UNIT/ML/ 400UNIT/ML/ 5UNIT/ML	SOLN	OTC-Covered w/Rx
	<i>multi-vitamin/fe</i>	35MG/ML/ 10MG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 1500UNIT/ML/ 400UNIT/ML/ 5UNIT/ML	SOLN	OTC-Covered w/Rx
	<i>multi-vitamin/fluoride</i>	35MG/ML/ 2MCG/ML/ 400UNIT/ML/ 0.5MG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 1500UNIT/ML/ 5UNIT/ML, 35MG/ML/ 2MCG/ML/ 400UNIT/ML/ 0.25MG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 1500UNIT/ML/ 5UNIT/ML	SOLN	AL (max: 12y)
	<i>multivitamins</i>	37.5MG/ 20MG/ 1MG/ 0.1MG/ 2MG/ 1.5MG/ 5000UNIT/ 400UNIT	TABS	OTC-Covered w/Rx
	<i>multivitamins/fluoride</i>	60MG/ 4.5MCG/ 400UNIT/ 0.5MG/ 0.3UNIT/ 12.9UNIT/ 10.5UNIT/ 1.6UNIT/ 1.3MG/ 2500UNIT/ 15MG, 60MG/ 4.5MCG/ 1MG/ 0.3MG/ 13.5MG/ 1.05MG/ 1.2MG/ 1.05MG/ 2500UNIT/ 400UNIT/ 15MG	CHEW	
	<i>mynatal advance</i>	120MG/ 200MG/ 400UNIT/ 2MG/ 12MCG/ 50MG/ 1MG/ 90MG/ 30MG/ 20MG/ 20MG/ 3.4MG/ 3MG/ 30UNIT/ 2700UNIT/ 25MG	TABS	
	<i>mynatal-z</i>	70MG/ 200MG/ 2.2MCG/ 65MG/ 1MG/ 100MG/ 17MG/ 175MCG/ 2.2MG/ 1.6MG/ 65MCG/ 1.5MG/ 4000UNIT/ 400UNIT/ 10UNIT/ 15MG	TABS	
	<i>mynate 90 plus</i>	120MG/ 250MG/ 2MG/ 12MCG/ 50MG/ 400UNIT/ 90MG/ 1MG/ 20MG/ 0.15MG/ 20MG/ 3.4MG/ 3MG/ 4000UNIT/ 30UNIT/ 25MG	TBCR	
<i>polyvitamin</i>	35MG/ML/ 2MCG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 1500UNIT/ML/ 400UNIT/ML/ 5UNIT/ML	SOLN	OTC-Covered w/Rx	

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Class	Product Name	Strengths	Form	Coverage Detail
	<i>polyvitamin /fluoride</i>	35MG/ML/ 400UNIT/ML/ 2MCG/ML/ 0.5MG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 5UNIT/ML/ 1500UNIT/ML	SOLN	AL (max: 12y)
	<i>polyvitamin /iron</i>	35MG/ML/ 400UNIT/ML/ 10MG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 1500UNIT/ML/ 5UNIT/ML	SOLN	OTC-Covered w/Rx
	<i>poly-vitamin/ iron/ fluoride</i>	35MG/ML/ 400UNIT/ML/ 0.5MG/ML/ 10MG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 1500UNIT/ML/ 5UNIT/ML, 35MG/ML/ 400UNIT/ML/ 0.25MG/ML/ 10MG/ML/ 8MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 5UNIT/ML/ 1500UNIT/ML	SOLN	AL (max: 12y)
	<i>poly-vitamin drops</i>	35MG/ML/ 50MCG/ML/ 2MCG/ML/ 8MG/ML/ 3MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 1500UNIT/ML/ 400UNIT/ML/ 5UNIT/ML	SOLN	OTC-Covered w/Rx
	<i>poly-vitamin/fluoride</i>	35MG/ML/ 50MCG/ML/ 2MCG/ML/ 0.25MG/ML/ 8MG/ML/ 3MG/ML/ 0.4MG/ML/ 0.6MG/ML/ 0.5MG/ML/ 1500UNIT/ML/ 400UNIT/ML/ 5UNIT/ML	SOLN	AL (max: 12y)
	<i>poly-vitamin/iron drops</i>	60MG/ML/ 4.5MCG/ML/ 10MG/ML/ 13.5MG/ML/ 1.05MG/ML/ 1.2MG/ML/ 1.05MG/ML/ 2500UNIT/ML/ 400UNIT/ML/ 11UNIT/ML	SOLN	OTC-Covered w/Rx
	<i>prenatabs obn</i>	120MG/ 200MG/ 400UNIT/ 8MCG/ 1MG/ 29MG/ 20MG/ 150MCG/ 3MG/ 3MG/ 3MG/ 30UNIT/ 15MG	TABS	
	<i>prenatabs rx</i>	120MG/ 400UNIT/ 30MCG/ 200MG/ 400UNIT/ 3MG/ 8MCG/ 1MG/ 29MG/ 100MG/ 20MG/ 7MG/ 150MCG/ 3MG/ 3MG/ 3MG/ 30UNIT/ 15MG	TABS	
	<i>prenatal 19</i>	100MG/ 1000UNIT/ 200MG/ 7MG/ 12MCG/ 25MG/ 29MG/ 1MG/ 6MG/ 20MG/ 3MG/ 3MG/ 400UNIT/ 30UNIT/ 20MG	CHEW	
	<i>prenatal low iron</i>	100MG/ 200MG/ 400UNIT/ 4MCG/ 27MG/ 0.8MG/ 18MG/ 2.6MG/ 1.7MG/ 1.5MG/ 4000UNIT/ 11MG/ 25MG	TABS	OTC-Covered w/Rx
	<i>prenatal plus</i>	120MG/ 200MG/ 400UNIT/ 2MG/ 12MCG/ 27MG/ 1MG/ 20MG/ 10MG/ 3MG/ 1.84MG/ 22MG/ 4000UNIT/ 25MG	TABS	
	<i>PRENATAL-U</i>	10MG/ 0.8MG/ 15MCG/ 106MG/ 1MG/ 1.3MG/ 30MG/ 5MG/ 6MG/ 200MG/ 10MG	CAPS	
	<i>prenavite multiple vitamin</i>	120MG/ 200MG/ 400UNIT/ 8MCG/ 28MG/ 800MCG/ 20MG/ 2.6MG/ 1.7MG/ 1.8MG/ 30UNIT/ 4000UNIT/ 25MG	TABS	OTC-Covered w/Rx
	<i>pruet dhaec</i>	120MG/ 3000UNIT/ 200MG/ 400UNIT/ 2MG/ 12MCG/ 295MG/ 1MG/ 29MG/ 0/ 25MG/ 20MG/ 430MG/ 25MG/ 4MG/ 1.8MG/ 3MG/ 25MG, 120MG/ 3000UNIT/ 200MG/ 400UNIT/ 2MG/ 12MCG/ 275MG/ 1MG/ 29MG/ 25MG/ 20MG/ 400MG/ 25MG/ 4MG/ 1.8MG/ 3MG/ 25MG	MISC	
	<i>re-nata 29 prenatal vitamin</i>	120MG/ 200MG/ 400UNIT/ 8MCG/ 1MG/ 29MG/ 20MG/ 150MCG/ 3MG/ 3MG/ 3MG/ 30UNIT/ 15MG	TABS	
	<i>therobec</i>	500MG/ 18MG/ 5MCG/ 0.5MG/ 100MG/ 4MG/ 15MG/ 15MG	TABS	
	<i>trinatal rx 1</i>	80MG/ 400UNIT/ 30MCG/ 200MG/ 400UNIT/ 3MG/ 2.5MCG/ 60MG/ 1MG/ 100MG/ 17MG/ 7MG/ 4MG/ 1.6MG/ 1.5MG/ 15UNIT/ 3600UNIT/ 25MG	TABS	
	<i>TRINATE</i>	120MG/ 3000UNIT/ 200MG/ 400UNIT/ 2MG/ 12MCG/ 28MG/ 1MG/ 25MG/ 20MG/ 25MG/ 4MG/ 1.8MG/ 22MG/ 25MG	TABS	
	<i>TRI-VI-SOL/IRON</i>	35MG/ML/ 10MG/ML/ 1500UNIT/ML/ 400UNIT/ML	SOLN	OTC-Covered w/Rx
	<i>tri-vit /fluoride</i>	35MG/ML/ 400UNIT/ML/ 0.25MG/ML/ 1500UNIT/ML	SOLN	

UPPERCASE=Brand Medications Lowercase italics=Generic Medication

Coverage Detail: PA=Prior Authorization ST= Step Edit AL= Age Limit requirement QL= Quantity Limit

# WellCare Health Plan Florida Medicaid Preferred Drug List

Class	Product Name	Strengths	Form	Coverage Detail
	<i>tri-vitamin</i>	35MG/ML/ 1500UNIT/ML/ 400UNIT/ML	SOLN	OTC-Covered w/Rx
	<i>tri-vitamin /iron /fluoride</i>	35UNIT/ML/ 0.25MG/ML/ 10MG/ML/ 1500UNIT/ML/ 400UNIT/ML	SOLN	
	<i>tri-vitamin/fluoride</i>	35MG/ML/ 0.5MG/ML/ 1500UNIT/ML/ 400UNIT/ML, 35MG/ML/ 0.25MG/ML/ 1500UNIT/ML/ 400UNIT/ML	SOLN	
	<i>tri-vitamins</i>	35MG/ML/ 1500UNIT/ML/ 400UNIT/ML	SOLN	OTC-Covered w/Rx
	ULTIMATECARE COMBO	100MG/ 35MCG/ 45MCG/ 1.3MG/ 12MCG/ 260MG/ 50MG/ 40MG/ 30MG/ 1MG/ 30MG/ 30MG/ 50MCG/ 20MG/ 330MG/ 7MG/ 50MG/ 3.4MG/ 75MCG/ 35MG/ 3MG/ 30UNIT/ 90MCG/ 11MG	MISC	
	<i>vinate az</i>	120MG/ 3000UNIT/ 30MCG/ 150MG/ 8MG/ 400UNIT/ 2.5MG/ 12MCG/ 27MG/ 1MG/ 75MG/ 20MG/ 30MG/ 3.5MG/ 3MG/ 30UNIT/ 15MG	TABS	
	VINATE AZ EXTRA	120MG/ 3000UNIT/ 30MCG/ 8MG/ 400UNIT/ 12MCG/ 29MG/ 1MG/ 75MG/ 20MG/ 50MG/ 3.5MG/ 3MG/ 30UNIT/ 15MG	TABS	
	<i>vinate qt</i>	120MG/ 30MCG/ 200MG/ 6MG/ 400UNIT/ 2MG/ 12MCG/ 50MG/ 1MG/ 90MG/ 30MG/ 20MG/ 20MG/ 3.4MG/ 3MG/ 10UNIT/ 2700UNIT/ 15MG	TABS	
	<i>vinate ii</i>	120MG/ 3000UNIT/ 200MG/ 400UNIT/ 2MG/ 12MCG/ 29MG/ 1MG/ 25MG/ 20MG/ 25MG/ 4MG/ 1.8MG/ 30UNIT/ 25MG	TABS	
	<i>vinate m</i>	120MG/ 30MCG/ 200MG/ 10MG/ 400UNIT/ 25MCG/ 2MG/ 12MCG/ 27MG/ 1MG/ 25MG/ 5MG/ 20MG/ 150MCG/ 10MG/ 3.4MG/ 25MCG/ 20MCG/ 3MG/ 30UNIT/ 5000UNIT/ 25MG	TABS	
	VITAFOL-OB	70MG/ 2700UNIT/ 100MG/ 400UNIT/ 2MG/ 12MCG/ 65MG/ 1MG/ 25MG/ 18MG/ 2.5MG/ 1.8MG/ 1.6MG/ 30UNIT/ 25MG	TABS	
	<i>vitamin b complex-c</i>	300MG/ 10MG/ 50MG/ 5MG/ 10.2MG/ 15MG	CAPS	OTC-Covered w/Rx
Vitamin A	<i>vitamin a</i>	8000UNIT, 10000UNIT	CAPS	OTC-Covered w/Rx
Vitamin B Complex	<i>cyanocobalamin</i>	1000MCG/ML	SOLN	
	<i>endur-acin</i>	500MG	TBCR	OTC-Covered w/Rx
	<i>folic acid</i>	1MG	TABS	
	<i>folic acid</i>	800MCG, 400MCG	TABS	OTC-Covered w/Rx
	<i>niacin</i>	50MG, 500MG, 250MG, 100MG	TABS	OTC-Covered w/Rx
	<i>niacin sr</i>	500MG	CPCR	OTC-Covered w/Rx
	<i>niacin td</i>	500MG	TBCR, CPCR	OTC-Covered w/Rx
	<i>niacin tr</i>	500MG	TBCR, CPCR	OTC-Covered w/Rx
	SLO-NIACIN	500MG	TBCR	
	<i>thiamine hcl</i>	100MG/ML	SOLN	
	<i>thiamine hcl</i>	100MG	TABS, SOLN	OTC-Covered w/Rx
	<i>vitamin b-1</i>	50MG, 250MG, 100MG	TABS	OTC-Covered w/Rx
	<i>vitamin b-6</i>	50MG, 500MG, 25MG, 250MG, 100MG	TABS	OTC-Covered w/Rx
	<i>vitamin b-6 tr</i>	200MG	TBCR	OTC-Covered w/Rx
Vitamin D	<i>calcitriol</i>	1MCG/ML, 0.5MCG, 0.25MCG	SOLN, CAPS	
	<i>vitamin d</i>	5000UNIT	CAPS	